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* * * *

"The Turks treat them with singular respect; whether it be that Mahomet himself was subject to mental derangement, or from a religious opinion, that as soon as a madman sets his foot into a house, the blessing of God enters it with him. They delay not a moment to set food before him, and caress him in the tenderest manner. There is not an instance known of their having injured any one. Our madmen, on the contrary, are mischievous, because they are miserable."

* * * *

"Many physical remedies are employed for the cure of madness; and it frequently proceeds from a moral cause, for it is produced by chagrin. Might there not be a possibility to employ, for the restoration of reason to those disordered beings, means directly opposed to those which occasioned the loss of reason; I mean mirth, pleasure, and, above all, the pleasures of music? We see, from the instance of Saul, what influence music possesses for re-establishing the harmony of the soul. With this ought to be united treatment the most gentle, and care to place the unhappy patient, when visited with paroxysms of rage, not under the restraint of fetters, but in an apartment matted round, where they could do no mischief either to themselves or others. I am persuaded that, by employing such humane precautions, numbers might be restored, especially if they were under the charge of persons not interested in perpetuating their derangement."—ST. PIERRE, 'STUDIES OF NATURE,' A.D. 1784.

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JOHN CONOLLY, M.D.,

FELLOW OF THE ROYAL COLLEGE OF PHYSICIANS, LONDON;
PHYSICIAN TO THE COUNTY OF MIDDLESEX LUNATIC HOSPITAL, HANWELL;
AND FORMERLY PROFESSOR OF MEDICINE AT THE LONDON UNIVERSITY;
ETC. ETC.

Dear Doctor Conolly,

Permit me to dedicate the following pages to you, not only in acknowledgment of your general accomplishments and success as a physician—such are well insisted on by the concurrent testimony of your many contemporaries in medical science and letters—but as an expression of the very high opinion I entertain of your many excellences, not only as a man, but as a philanthropist.

The remembrance of your successful exertions in the cause of the unhappy lunatic must ever command the sincerest admiration of all men; and to have been once united with you in your labours at the Hanwell County Lunatic Hospital will always be regarded as among the most fortunate events of my life, and the circumstance itself be remembered with feelings of gratitude and affection.

Always yours, most sincerely,

JAMES GEORGE DAVEY.

Hanwell; *November* 1849.

PREFACE.

The Contributions to Mental Pathology contained in this volume constitute my Annual Reports, to the Colonial Government of Ceylon, of the Lunatic Hospital under my charge, and matters connected with it, and the patients therein, &c. I have been at some pains to render these said Reports of general interest, and have therefore lost no opportunity afforded me by local matters and local experience, to illustrate those general principles of medical science holding a relation to or dependence upon this one department of practice, viz. Insanity. In the succeeding pages will also be found, if I mistake not, not a little of deep interest to him engaged in medico-legal inquiries; for, in the absence generally of sound principles of physiology and pathology, the jurist is now only tortured with opinions on insanity, and the responsibility of the insane, not only derogatory to all science, but in strict opposition to the dictates of the *lowest* humanity. The observations herein made, I trust and think will be found of some

use, and will help to demonstrate not only the simplicity of truth, but its harmony with the higher sentiments of our nature.

These Reports were from the first intended for publication, not only as so many Medical Essays, but as a means to an end. From the period of my arrival in Ceylon, as a Government Medical Servant, I plainly saw that my position was beset with difficulties and danger; it was directly perceived by me that no common prudence would carry me harmless through the crooked ways prepared for me by jealous officials and prejudiced and spiteful contemporaries. It required no lynx-eye to discover the dirty opposition and threatened enmity which manifested themselves towards me, or rather the appointment I had been sent from England to fill. I took my precautions accordingly. I soon experienced the consequences of being considered an intruding member of the colonial medical service; neither the military aristocrats, nor their servile burgher friends, who together form the colonial medical staff of Ceylon, could or would allow themselves to sit quietly down and endure so serious an innovation as that one which threatened the infringement or extinction of their exclusive professional privileges. Acting on the principle that union is strength, these most worthy doctors formed themselves into a clique, reserving to

themselves the privilege of employing every little and mean artifice they could invent, to throw both discredit on my appointment and suspicion on myself. From January 1845 to the present time, viz. October 1848, has this clique, headed by the Principal Civil Medical Officer, whose high and honorable position should encourage us to hope for better conduct at his hands, lost no opportunity to abuse and vilify me and my appointment, the Lunatic Hospital, and everything which can appertain to the same.

The contents of the succeeding pages will prove how much and seriously I have been interfered with—will show to what extent the comfort and well-being of the insane poor in Ceylon have been sacrificed to such interference—will demonstrate the consummate ignorance and presumption which have characterised the acts of my unworthy opponents—and not less will they demonstrate the self-interest ever kept in view by them.

The reader will see good reason to believe, that had I allowed the new Lunatic Hospital to have been built at Hendelle without opposition, and thereby perpetuated the neglect and misery the insane had so long endured in the hands of the military and burgher medical staff—had I continued to employ the chains and manacles which had so long galled the unhappy lunatic under the old regime—had I

permitted the rate of mortality to continue at 33 + per cent.—had I not bestirred myself, and increased the number of cures at Hendelle from 0 to nearly 40 per cent.—had I not, in a word, worked out fairly and mildly, through good and through evil report, and in the face of much and earnest opposition, and even rebuke, the amelioration of the insane in Ceylon, to whose care and protection I had the honour of promotion by Lord Stanley when at the head of colonial affairs, in 1844, then should I have escaped the charges of disrespect, &c., which have been brought against me, both anonymously and otherwise, in the pages of the Colombo press; and I may with much truth add, that the same could hardly have happened had I been fairly supported by the Colonial Government during my sojourn in Ceylon. In anticipation, then, of being called on, at some time, for something like a defence of my plans and proceedings, I prepared the subjoined Reports; and in order to render this book the more complete and interesting, I have prefixed the "Introductory Observations, containing the past and present state of the insane in Ceylon."

At page 58 I have taken the opportunity there afforded me, to reply to a certain letter, signed "J. M. Grant." Now, inasmuch as this same letter was written, if not at the desire, certainly by the

advice and under the authority of Dr. Roe, the head of the medical department at Ceylon, and a military man, I hold the latter gentleman equally responsible as the former for the charges of inattention and disrespect therein made. To the first charge I reply by a reference to the facts contained throughout this volume; the second charge, like the first, is put interrogatively or suggestively, with the view of securing to this keen-sighted plaintiff all the advantages without the responsibility of a direct assertion. "*If he*," that is, I, "*will say that he has invariably treated the Principal Medical Officer with that deference and respect which were due from him, he will find that on this point also there may be two opinions.*" No doubt of it. Did the terms of my engagement to the Government require me in any way, by implication only, even so much as to consult with the Principal Medical Officer, or to communicate officially with him, then should I have felt, both in honour and duty, bound to have yielded implicitly to his wishes and pleasure; but inasmuch as the correspondence between myself and the late Secretary of State for the Colonies (Lord Stanley), in 1844, neither takes the slightest cognisance of, nor even so much as alludes to, any Principal Medical Officer, I have at all times felt he could have no proper authority to interfere with me, nor with the discharge

of those specific duties I was appointed expressly to perform. I received from Lord Stanley, in 1844, the appointment and title of *Superintendent of the Insane in Ceylon*,* with instructions to proceed thereto, and report myself as such to the *Governor*. Not only so; I was appointed to the situation in virtue of my large experience at Hanwell, and in consequence of my peculiar fitness for the duties required of me. Of what utility could such experience and fitness prove, if the Principal Medical Officer were to continue to exercise supreme control over me and my actions? and more particularly, when the medical department of the colony, to which both he and J. M. Grant belong, had for so many successive years not only proved itself either incompetent or disinclined to look after the interests of the insane, but had allowed them to reach by successive steps the climax of all wretchedness and neglect; so much so, as to induce both private individuals and public servants to bestir themselves in their behalf.

If the conscientious discharge of a duty imposed on me by the terms of my office, and intended to diminish the sufferings and distress of the poor and

* In the 'Ceylon Gazetteer,' published on the authority of the *local* Government for 1849, I am styled the "*Medical Attendant*" of the Lunatic Hospital, and Dr. Roe, as "the Principal Civil Medical Officer, the *Superintendent* thereof."

forsaken lunatic in Ceylon, be evidence sufficient, then, and then *only,* do I plead guilty to the charge of disrespect to the P. C. M. O. It should be known that, although I have, on three different occasions, brought this matter of the Principal Medical Officer and myself to the attention of the local Government, I have never yet received any kind of explanation of our relative positions. In the "*ordinance, to amend the law relative to the establishment of Lunatic Asylums, and to make further general provisions for the proper care and custody of insane persons,*" it is enacted only that a Superintendent of Lunatics shall be appointed; the said "*ordinance*" does not say that the "*superintendent thereof*" having been duly appointed by the Secretary of State for the Colonies, the "*chief superintendence of the asylum*" shall be vested in the "Principal Medical Officer," as I am informed by the subjoined letter sent to me for my information.

[Copy.] "*For the information of the Superintendent of the Lunatic Asylum.*

"Colonial Secretary's Office, Colombo;
21st June, 1848.

"Gentlemen,—I am directed by the Governor to intimate to you his Excellency's wish that you should accept, in addition to your duty of visiting the prisons of Colombo, the office of Visitors of the

Lunatic Asylum at Wellicadde. I am directed further to intimate to you, that on all occasions when you wish to have the attendance of the Principal Medical Officer, who has the chief superintendence of the asylum, Dr. Roe* will be prepared to accompany you; and his Excellency would suggest that it would be highly desirable on such occasions to have the advantage of his presence for facility of explanation and inquiry.

"I have, &c.

(Signed) "J. E. Tennent.

"A true copy. (Signed) "W. Morris.

"True copy. "S. Roe,

"Principal Civil Medical Officer."

"The Rev. J. G. Macvicar, D.D.
The Hon. H. C. Selby, Esq.
W. Morris, Esq.
W. D. Bernard, Esq."

It is plainly to be perceived from the foregoing, that the Home and Colonial Governments have never been animated by the same desires or feelings. Had the Secretary of State and the Governor of Ceylon thought alike on the nature and object of

* I am told by the "*Medical Resident*" at the Lunatic Hospital, that however frequent Dr. Roe's visits to him may be, yet that he (Dr. *Roe*) has not seen the interior of the wards for so many as eight successive months. So much for his "*chief superintendence!*"

my appointment, much inconvenience and unpleasantness might have bcen avoided. It was plainly the duty of the local Government, on my arrival in the colony (in 1844), if *not* to confirm the rank and position awarded me by Lord Stanley, at least to authorize me to regard the Principal Medical Officer as my superior, and thereby to modify the nature and extent of my responsibilities, and not leave the discharge of so important a duty until the "21st *of June*, 1848," the date of the preceding letter, that is, supposing it a sufficient authority.

During my sojourn in Ceylon, I have felt myself in no small degree responsible for the proper discharge of my duties to those gentlemen who were instrumental in presenting my claims to the attention of Lord Stanley. I doubt not that all parties *at home* would hold me alone responsible for any faults of omission or commission in connexion with the department I am supposed generally to preside over here. The Commissioners of Lunacy of England and Wales, and the Society for the Cure and Protection of the Insane, will, I fancy, raise their hands and eyes in astonishment, when they learn the opposition which has met me in Ceylon; when they are told that the Secretary of State, having engaged a medical man at a salary of £800

a year,* and sent him to Ceylon in the capacity of Superintendent of the Government Lunatic Hospital at Colombo, he there found himself under the direction of a *military surgeon,* one of the very old school, with no kind of acquaintance with cerebral affections, or the construction and management of Lunatic Hospitals—of one, whose mind may be said to be in a *strait-waistcoat,* to borrow a simile from the pages of the 'India Register of Medical Science.' Nevertheless, all may have gone on quietly and comfortably, if Drs. St. John and

* The terms of my appointment specified £500 a year, with "*board and apartments, &c.*" I was assured I should be put, in regard to the latter, on precisely the same footing at Ceylon as I enjoyed at Hanwell; but instead of that, I was allowed £300 yearly as an equivalent. Although £300 would have been a very fair "*equivalent*" at home, it proved far otherwise at Ceylon. The general and domestic expenses at the latter exceed by sixty or seventy per cent. those in England. This fact is very necessary to be known to a person exchanging an appointment here for another abroad. So little are the gentlemen composing the local Government of a British colony acquainted with either the principles or facts which obtain in Europe, that at Ceylon I was directed to receive 1*s.* 6*d.* a day for "*board and apartments;*" and after the lapse of about ten months, when on the receipt of the Secretary of State's authority from London to pay me the "*equivalent*" £300 annually, I was informed by the Acting Colonial Secretary, that this arrangement would take place from the 1st proximo. As I saw no reason why the arrears due to me should not be allowed, I demanded the same: they were forthwith paid. This hint might not be lost on my professional brethren.

Roe had chosen to respond in peace and good-will to the personal sacrifices I offered to their rank and age, and had for common charity's sake preferred to co-operate with me, and aid the good cause in hand. Had they done so, then could I not claim, as I do now, the entire credit which belongs to the great and manifest improvement in the condition of the insane poor at Colombo—I wish I could add, in CEYLON.

I should never have written thus much, had I not felt it necessary to defend myself against the animadversions so ungenerously and unprofessionally cast on me; and I should not have so felt, had the local Government done me the justice to interfere and protect me from the slander and falsehood so manifest in the pages of the 'Ceylon Times,' and to which I called its attention in connexion with a minute by the *Governor*, which forbids public servants from engaging in any irritating correspondence, &c. The reduction of the medical establishment of the island, and the more than probable consequent vacation of my appointment at Ceylon,* is an additional reason for the notice herein taken of the strictures

* The following observations are taken from a demi-official letter addressed by me to the Honorable Colonial Secretary, Sir J. E. Tennent:—"I have seemed a perfect incognitus in Ceylon, and my situation an enigma; a fact confirmed by the omission of my name from the list of civil servants, and its

of Messrs. Roe, Grant, and Company, and for which they can find no good excuse. The mere accidental mention of my name by an independent journalist, in connexion with any amelioration of the insane at Colombo, cannot render *me* responsible for his "reflections upon the medical department," to quote Dr. Grant's letter. Surely both Dr. Roe and he must perceive how signally they have failed in removing the impression made on the minds of all fair-judging people. Their personal reminiscences afforded no denial of the plain facts adduced in support of my success and zeal: such portrayed neither *"judgment," "good taste,"* nor *"reflection."*

Their best defence, *under the circumstances*, of the medical department they have ventured, *Quixote-like*, to represent, may have been conveyed in the following simple sentence, dictated by Demosthenes to the Athenians, in reference to the

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insertion in that of the fixed or Colonial Establishment: but I hardly suppose it was intended to rank me with the native clerks and subordinates in the several Government departments." The Superintendent of the Botanic Garden is put on the Civil List, and why should *not* the "*Superintendent of Lunatics?*" and, moreover, the former appointment, unlike the latter, is not subject to the surveillance of the garrison physician, or senior military medical man. I mention this, because I would put medical gentlemen not in the military service on their guard when receiving appointments at our colonies.

famous Macedonian King PHILIP: *"For it is not to his own strength that he so much owes his elevation as to our supineness."* That much of the prejudice and enmity manifested, originated in revenge for the faithful discharge of a portion of my duty, which involved a medical sub-assistant, a near relation of the first clerk in the office of the head of the medical department, in disgrace, I have pretty sure evidence; but such, even, would never have been so apparent, if this said first clerk were not so indispensable as he is to his superiors.

Whatever might transpire, I do not think the gentleman at present in charge of the medical stores is at all likely to succeed me, although he has probably rendered the state some service, and his private friends yet more. Presuming on his ill success, he reminds me not a little of the famous *"Master Lint the potter-carrier,"* whose unhappy application to "THE MAYOR OF GARRET," to *"lend a ministering hand to the maimed,"* on *"the day of election,"* had well-nigh cost him the little village reputation *he* enjoyed, in spite of his *"bloodletting, tooth-drawing, corn-cutting, worm-killing, blistering, and glistering"* successes.*

Messrs. *Shallow* and *Slender*, of WINDSOR notoriety,

* See Thomas's Burlesque Drama.

were sadly put out of countenanee on discovering the fallaey of *their* best hopes and aspiration. I hope their prototypes at Ceylon might never find themselves so much perplexed as the latter of these two worthies did when Mistress Ann Page revealed herself as *"a great lubberly boy."* However, *ambition,* like *love,* is exposed to aecidents.

In eoncluding these observations, I would remind those who have so far stepped out of their way but to slander a medieal brother, on the idle plea of retaliation, that

> "The memory of mischief is no desirable fame."
>
> JOHNSON.

"*Emulation* looks out for *merits,* that she may exalt herself by a *victory;* but *envy* spies out *blemishes,* that she may lower another by a *defeat.*"

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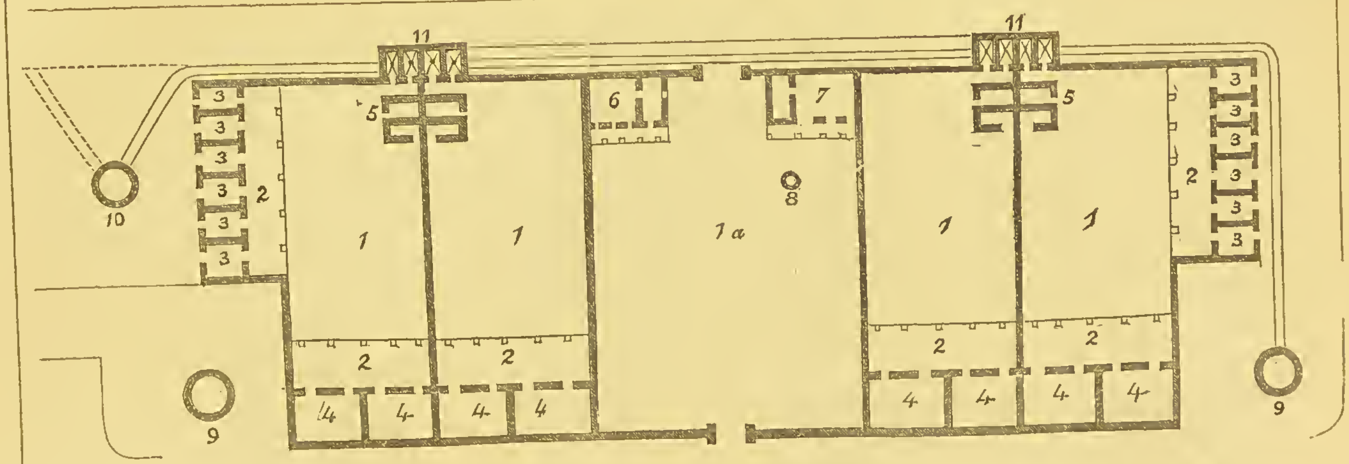

1. Court-yards, 77 × 52.
1 *a*. Court-yard, 91 × 87.
2. Galleries, 51 × 16, 56 × 12.
3. Dormitories, 12 × 8.
4. Dormitories, 25 × 15.
5. Washing Sheds, 11 × 6.
6. Godown, 31 × 6, 22 × 15, 15 × 7.
7. Cook-room, 31 × 22, 31 × 6, 15 × 7.
8. A small well.
9. Wells.
10. Cesspool.
11. Privies, 8 × 5.

*** The cleaning and clearing of the ground contiguous to the Asylum have proved a highly desirable employment for the Insane. Under the direction of a proper person, not only has the jungle or rank vegetation, &c., been rooted up and destroyed by the patients, but the soil has been, in many places, levelled, and proper drains constructed; whereby the moisture, which only contributed to the formation of innumerable small ponds or puddles about the once broken ground, is now carried well off the premises to the contiguous canal. What was formerly an unsightly patch of jungle about the Asylum, is now quickly assuming the appearance of a pleasant garden, the produce of which, in the shape of various vegetables, &c., peculiar to the country, is held in high estimation by the unfortunate inmates. It is proper to mention, the insane have been assisted in their agricultural labours by the prisoners at the contiguous Jail. The vegetables and fruit, not forgetting the betel leaf and arcka-nut,—both of which are planted on the premises—and highly prized by the dark races in the East as masticatories—will, together, contribute not only to the health of the insane, but to their personal comfort. The maniac among Asiatics is more likely to be composed by a mouthful of betel than anything else.

ERRATA.

Page	*Line*	
4	5	*for* 'of sheds' *read* 'or sheds.'
30	7	*for* 'earnest' *read* 'great.'
53	10, 11	from bottom (Note), *omit the words* 'above referred to.'
134	5	from bottom, *for* 'are' *read* 'is.'
148	2	*for* 'objectional' *read* 'objectionable.'
174	3	from bottom (Note), *for* 'former' *read* 'lunatic.'
174	2	,, (Note), *for* 'latter' *read* 'sane.'
225	15	,, (Note), *for* 'statement' *read* 'statements.'
227	11	(Note), *for* 'it' *read* 'mental disorder.'

CONTRIBUTIONS

TO

MENTAL PATHOLOGY.

INTRODUCTORY OBSERVATIONS.

THE PAST AND PRESENT STATE OF THE INSANE IN CEYLON, ETC. ETC.

If there be a task more agreeable than another, it is that one which registers the onward course of man; or, what is the same thing, the progression of humanity and science. To the present generation has been reserved the high privilege of ministering to the proper wants and necessities of a large body of individuals theretofore not only neglected, but oppressed. With the same kind regard and reverence which is destined for ever to be associated with the names of Wilberforce, Howard, and Fry, whose benevolent exertions in the cause of the slave and criminal must be one day better appreciated than at this time, will be remembered those of Pinel, Hill, and Conolly; through the carnest endeavours of whom the *lunatic* is now considered a fit and deserving subject of our best regards and sympathies and therefore no longer the recipient of

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that neglect and contumely which served but to swell the bills of mortality, and so furnish an additional illustration of the consequences of man's neglect of the natural laws of his Creator, to which he owes both existence and enjoyment.

Inasmuch as it is to the proper diffusion in the civilized world of the excellent principles taught by the accomplished physicians whose names are here mentioned, we must look for that general amelioration in the condition of the insane so much desired by the philanthropist and man of science, with no trifling pleasure do I refer the reader of these pages to the enthusiastic support of the humane principles of treatment, as applied to the insane, to be found in the columns of the 'Ceylon Observer' for 1843. Although the government of the colony, Ceylon, had for some years past contemplated the introduction of an improved system of management of the lunatics in confinement at the Leper Hospital, and the jail at Colombo, and elsewhere in the island, and had viewed with much regret and dissatisfaction their neglected and miserable condition, yet was it *not* until the subject of it was brought prominently to their notice in the aforesaid periodical, that any kind of means were taken to remedy the defects so justly complained of; and therefore does it appear that, to Mr. Elliot, the talented editor and proprietor of the 'Observer,' must be awarded not a little of the credit which belongs to the praiseworthy

endeavours made by the colonial government; to be presently explained.

The following *facts,* recorded in the 'Overland Observer,' are from the pen of Mr. Elliot, whose skill and experience as a *surgeon* are good evidence of his judgment in this matter. In 1843 the majority of the lunatics in confinement at Colombo were kept in the *jail,* at that time termed, and not inaptly, "*a hell upon earth,*" and in this place were to be found, not only lunatics, both *male* and *female,* but prisoners of all kinds and ages, both civil and criminal; those suspected, accused, and convicted. In 1843 the insane in Ceylon were "confined in gloomy cells, into which light and air are admitted by a small iron-barred opening in the door, through which they may be seen gazing, or may be gazed upon, like so many wild beasts." In 1843 the insane in Ceylon were without the opportunities of *exercise* or *recreation,* else than what of either could be obtained in "a small yard, common to all the cells, and not above a few yards wide." In 1843 the lunatics in Ceylon were subject to so imperfect a discipline, that "the most lawless and immoral conduct prevailed" among them;—and I would ask, what less could be expected, when the female lunatics were not separated from the opposite sex, whether insane or otherwise? In 1843 the "deficient cleanliness" among the insane in Ceylon was such that "a certain receptacle of filth has been allowed to

accumulate until it is (was) almost intolerable." Those among the insane who were not kept at this jail were, in 1843, lodged at the Leper Hospital, so called. This extraordinary place consisted then, as it does now, principally of various hovels of sheds, built of mud and sticks, and thatched with the leaves of the cocoa-nut tree; and these erections, together with two or three others of more solid materials, but in the most ruinous, dirty, and dangerous condition, the whole presenting an appearance at once the most disgusting and pitiable, constituted the abodes of not only insane patients, male and female, but of the lepers, including also a number of other objects of rare compassion, suffering from old ulcers, neglected syphilis, tuberculous disease, deformities, &c., and all huddled together in the most squalid and shameful manner possible, not only without any attempt at classification; but, what is more, without the facilities necessary to separate the sexes:

> "A lazar-house it seemed—wherein were laid
> Numbers of all diseased." MILTON.

Charles Dickens may describe the horrors of this place, as they were presented to my mind in December, 1844, when I arrived in Ceylon; but *I* could not presume to do more than mention them thus *generally*. By a writer in the 'Observer,' in 1843, the Leper Hospital is (was) said "*to resemble a pigsty in design.*" So I found it in 1844; and as such, I regret to say, it continued, in spite of my

repeated reports and suggestions to the principal civil medical officer—as I shall, in the course of these pages, distinctly prove. The *jail*, which I have already mentioned, is spoken of, in the 'Observer' of September 1843,* as a *palace*, in comparison with this *Leper Hospital;* for *here* Mr. Elliot—whose veracity in this particular has never once been called in question—declares that (in 1843) he found *twenty* lunatics crammed in *nine* cells; and adds, that "*as some among them have to be kept alone, several are confined together.*" The inmates slept *then* on "filthy pieces of old mat, on the dirty brick floor of the cell." The shocking and cruel neglect of the insane at Colombo in 1843 is demonstrated in the following extracts from a Report published at the time, by one interested in the cause of humanity and reason:

"In the centre of the brick floor of each cell there is a small grating, which *once* opened into a sewer for the receptacle of the filth; but the sewer being now choked, the offence which the eye and nose experience is better conceived than expressed.

"Approaching a closed door, a keeper called to the inmate, who was immediately heard scrambling up the back of the door to a little barred window over it, out of which he looked whilst he held him-

* In 1843 the mortality among the insane at the Leper Hospital at Hendelle was 59 + per cent. per annum; but in the following year, viz. 1844, it was reduced to 33 + per cent. per annum—a fact plainly attributable to Mr. Elliot's praiseworthy exertions in the cause of the lunatic.

self by the bars. On inquiry, we learned that he was generally well conducted, but that having lately struck a woman, he was confined as a *punishment*.*

"What language can give any idea of his cell? He certainly had his stone cot and his mat, and needed not, therefore, to lie upon the damp floor; but such a floor! covered with the dirt of bats, myriads of which were flying and hanging about the roof; whilst the choked sewer in the centre of the apartment, and the entire want of ventilation, rendered the stench intolerable."

In December 1844, I found this same person in close bodily restraint. He died from acute dysentery in the following year; but with a proper system of management I found him, though occasionally *irritable*, generally quiet, and even good-natured. The attention he received was readily responded to; he became orderly in his habits and cleanly in his person.

"In another cell almost the same scene was presented, only that the poor, old, timid man who occupied it appeared to have been forgotten. The filth from his person was allowed to collect for several days in the corners of his cell; and the only reason assigned for his being shut up was, that if

* Mr. Sergeant Adams, whose good exertions in the cause of the lunatic are well known, was, I believe, once asked by a person favorable to the restraint principle, how he would manage a lunatic disposed to acts of violence. He replied, he would certainly first keep every kind of weapon out of his reach; that male lunatic with a propensity to commit violence on *women*, would be best controlled by being kept from the opposite sex.

the lunatic last spoken of were out (which he was not, be it remembered) he would drive this old man into his cell, and shut the door.

"The last case we shall harrow our own feelings, or the feelings of our readers, by mentioning, was that of a poor old paralytic woman, who could move only her hands, which she feebly raised in a supplicating manner, whilst the tears ran down her shrivelled cheeks. This also is an individual to whom a cot is denied, so that she is obliged to lie on the bricks, without, we believe, being able to turn from one side to the other.

"Facts like these require no comment; we shall not therefore at present dwell on scenes, from the contemplation of which nature recoils—scenes at the recital of which humanity shudders."

A visitor to such "*scenes*" may well exclaim—

"What are these,
So withered and so soil'd in their attire,
That look not like th' inhabitants of the earth,
And yet are on it?" SHAKESPEARE.

It should be known that at the time to which the above extracts refer, the *insane* at Colombo, both those at the jail and at the establishment for lepers, were under the medical charge of the *Principal Civil Medical Officer*; or, as he is styled in military parlance, the *Deputy Inspector-General of the Hospitals*.*

* At colonial settlements not yet emerged from the *military* character, and in the absence of a respectable civil community necessary to the existence of municipal corporations, &c., *on the medical officers of the army* devolve the duties more properly be-

As may be expected, the government found it impossible any longer to defer the consideration of the cause of the insane in Ceylon; and accordingly at a meeting of the Legislative Council, in October of the same year, viz. 1843, Mr. Armitage, a gentleman of well-known abilities, brought the matter, formally, to the notice of those present. The discussion that followed the motion of Mr. Armitage resulted in the appointment of a *committee* to report on the lunatics in confinement, and on the best means of ameliorating their condition, and also on the propriety of obtaining the services "of a proper person from England" to superintend the insane in the colony.*

But *one* member of the council expressed himself aggrieved at the strictures published in the 'Observer,'

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longing to the civil surgeon; and inasmuch as my own appointment at Ceylon was thought an infringement of this rule, we are at no loss to account for the hostilities manifested by the senior military surgeons, Messrs. St. John and Roe, who, as "birds of passage," are intent only on promotion; who, without local interest or reputation of any kind, except that which belongs to old age, could hardly be expected to sympathise or co-operate with one whose appointment was said to be rendered necessary only on account of the incompetency or neglect of the military medical staff; and this much the government may have anticipated with advantage, if I mistake not.

* In reading through the report of the proceedings of this meeting of the Legislative Council, it cannot fail to strike one that no one member of this body seemed to have the slightest idea that "THE PERSON" required was a *medical man*. The words "*officer*," "*manager*," "*person*," occur frequently, but no idea was entertained apparently that a professional man was needed.

and he *alone* ventured to deny that "*the state* of the lunatics was *dreadful*." *The agent for the Western Province* is represented to have said that "he had every reason to believe the lunatics are (were) as well taken care of as their lamentable situation will admit of, although he certainly must admit the great defect in the want of proper drainage." A species of reasoning not very easy of demonstration to most persons.

After some trouble, I have obtained the Report of the said committee, and it confirms in every particular the facts already presented to the reader's attention, as the following quotations from it prove. It, the Report, is divided into two parts: the first part treats of the Leper Hospital and its inmates; and the second of the Jail Asylum. I have here followed the same plan in treating them.

Of the LEPER HOSPITAL it is observed, "there are nine cells, . . and in one, the occupant, Cassim, afflicted with paralysis of the lower limbs, sleeps on the floor, which is damp, and has, in many places, deposits of his own evacuations. The smell in this, as well as in the other cells in which the lunatics are confined, is very offensive. The floor in each slopes towards a grated aperture in the centre of the room, beneath which is a drain extending along the middle of the cells in one range. Every drain is choked up to the surface of the grating, and in one instance

the floor appeared not to have been cleansed and the offensive deposits rcmoved for five or six days. The smell of the urine, which can no longcr pass off by the sewer, and is absorbed in the bricks, is most offensivc.

"The cells are ill-ventilatcd, and nearly dark whcn the door is closed. Numbers of bats continually fly about, and their excrement adds considerably to the stench; *some of the patients have their* FIXED *abode in their cells.*

"The entirc building requires to be repaired; the cells have becn neglected for the last three years."

THE JAIL ASYLUM. "There are twelve cells in this establishment; but one is occupied by a prisoner under sentence of death.

"The cells require white-washing and plastering; *and are less efficiently ventilated than those at the Leper Hospital;* but they are free from bats."

From the prcceding extracts alone are we assured of the necessity which then existed for an entire and radical change in this one department of the colonial medical service of Ceylon; and if any additional evidence of the awful and neglected condition of the insane could, by any possibility, be deemed necessary, I would submit the following few words in reference to the employment of mcchanical restraint: Messrs. Mooyaart, Gibson, Armitage, and Darley tcll us, in their rcport to the local governmcnt, that thc Leper Hospital contained (in 1843) *six* male

lunatics and *thirteen* female; that "all are represented as being occasionally violent," and that "on such occasions, the means of restraint are the strait-waistcoat, and sometimes handcuffs and chains," and that the most violent "are kept confined in cells." At the Jail Asylum, the same gentlemen inform us, "the means of restraint are (were in 1843) the strait-waistcoat, handcuffs, and the stocks." The above official statements of the committee, in so far as both the Leper Hospital and Jail Asylum are concerned, I verified on my arrival in Ceylon in December 1844; a period of fourteen months having been suffered to elapse apparently without one single step having been made towards any amelioration of the unhappy and forsaken lunatic.

In a local print there appeared, in 1843, these words: "What a melancholy picture does this report," meaning that one under consideration, "exhibit of the treatment of lunatics at the present day in an old-established British colony! The single fact alone would stamp the barbarity of it—that one half of the insane are treated as criminals in the jail, and the other half herded with the subjects of an incurable disease."

By referring above to the notice of the meeting of the Legislative Council, it will be seen with what unanimity it was agreed to recommend to the Secretary of State the appointment of a *Superintendent of the Insane*, and the *Committee* as readily

adopted the same opinion; for in their "*recommendations*" to the government of the colony are found these words: "*But the point on which your committee would lay most stress, is the appointment of a person trained in one of the well-conducted asylums of the United Kingdom, such as Hanwell, who could classify the lunatics, vary the treatment according to circumstances, and not only render the condition of these unfortunate beings a comparatively happy one, but even restore many of them to reason. Perhaps the condition of lunatics in this island is not worse than what it was in many of the pauper asylums of the United Kingdom twenty-five years ago; but looking to the improvements of the system now pursued at home, and to the happy effects resulting from these improvements, your committee feel imperatively called upon to advocate a like amelioration here, confident that their recommendations will meet with the attention they merit from your honorable council.*"

The Council, as was to be anticipated, did exactly as it was required to do; and on the receipt of the *despatches* by Lord Stanley, (the Secretary of State for the Colonies), in the spring of 1844, the Colonial Agent, George Baillie, Esq., visited Hanwell, and in the name of the government made an offer, first to my then colleague, Dr. Begley, who declined it, and afterwards to myself, to proceed to Ceylon in the capacity of *Superintendent of the Insane*. All the necessary preliminaries being arranged, I left the

County Lunatic Hospital at Hanwell, where I had resided nearly four years, in July, and on the same day embarked for Ceylon, where I arrived in *December* 1844.

Pending my arrival in the colony, the local government transferred its responsibility to a second committee, composed, not of members of the Legislative Council, but of private individuals, and on them then rested the care and protection of the lunatic. The Report addressed by this body of gentlemen to the government of Ceylon, and dated "*April* 11, 1844," confirms in every way both the statements put forward in the 'Observer' by Mr. Elliot, as well as those contained in the Report of the committee of the Legislative Council, as the following extracts will prove:

"The condition of the insane in the two establishments in which they are now confined, we have found to be *most unsatisfactory, and to call aloud for a change with the least possible delay*. . . . The medical men in charge must find themselves unable to discharge 'their duties' to their patients. . . . And it is or *was* urged that *under proper treatment the recovery of many of the insane may be anticipated.*

"The number of insane at present in confinement is thirty-nine, of whom *twenty-four* are in the jail at Hulfsdorp, and *fifteen* in the Leper Hospital at Hendelle. At Hulfsdorp there is no accommoda-

tion for those who are not allowed to mingle with others, *or the prisoners,* but close cells without windows, and having only a grating in the door for the admission of light, and cross holes in the brickwork over the doors for the admission of a little air. The area over which the harmless patients may range is so small as to be wholly insufficient; and wherever they turn their eyes they find themselves in the midst of felons imprisoned for their crimes." The Leper Hospital is or was said to contain, besides "*fifteen*" lunatics, "thirty-five helpless beings, . . . the majority either incurable *lepers,* or patients labouring under obstinate ulcers or permanent blindness; and with these the insane patients are more or less mixed up."

"The ruinous state" of this establishment was adverted to, and certain repairs suggested. The following sentence occurs: "Until the repairs referred to be made, it ought not to be concealed that the roof is in several places, and will be, in an absolutely dangerous state; while, in consequence of a very ill-constructed drain which underlies the middle of the series of cells on both sides, opening into each by a grating, and which is already in its whole length irreparably choked up with ordure, *both sides of the establishment are in such a state as to be wholly unfit for use.*"

About seven months anterior to the period at which the above sentence was penned by the Jail

and Hospital Committee (Messrs. Macvicar, Horsford, Palm, Gogerly, &c.), the medical gentleman *in the immediate charge* of the civil establishments of the Government at Colombo, R. Templeton, Esq., then the Assistant-Surgeon of Artillery, gave the following opinion; it is copied from the "*Evidences*" appended to the Report of the Committee of the Legislative Council:

"The walls of the entire building are in tolerable condition, but the roof is in a very bad state; two wards are in such a dangerous state, that I have not been able for *two* years to put patients in them. This has caused an unnecessary degree of crowding in other places, and principally in that part allotted to the lunatics. If the whole building were put in thorough repair, and some improvement made in the cells, I could go on for a few years without additional buildings for lunatics, though I do not overlook the necessity, at some future time, of providing a separate establishment for this latter class of patients."

It is but common justice to Mr. Templeton to add, that he is considered *not* to have been armed with sufficient power to carry out whatever improvements he may have wished; and it is added, "meeting with opposition, nothing has been done."

But in spite of the body of evidence submitted to the colonial government in 1843 and 1844, both by individuals and by committees, a small portion of which is here brought together, matters were allowed

to proceed as they best may; and, from all I have been able to understand, on my arrival in December 1844, the sense of duty or good feeling, which had up to this time prompted the various visitings, the reports, and the suggestions of those most concerned, became substituted by so cold an indifference to the cause of the lunatic, that it was not until *September* 1847, *nearly three years after my arrival at Ceylon,* that I succeeded in effecting else than a mere patchwork amelioration in the condition of the insane poor. In *September* 1847, the lunatics were removed to the new hospital. Moreover, I found, on first arriving at Colombo, that the appointment of a *medical man* was not only not anticipated, but that it was regarded in a very unpopular light, and as an infringement of the rights and privileges of both the military and colonial medical services; and hence my position was soon found to be one in no way enviable. It was said I was *not* the person wanted nor required by the Legislative Council; that the Secretary of State had done wrong in sending such a person out; that a "*manager*" only was needed to classify the lunatics, and see to their various domestic wants and accommodation.

As the terms of my appointment directed me, I lost no time in reporting myself "*to the Governor.*" I presented my credentials to the Colonial Secretary, and from *him* I first heard of the "*Deputy Inspector-General of Hospitals,*" or the Senior Military Surgeon; and to this gentleman I

was requested to report myself, he being the principal *civil* medical officer to whom I was informed I must look for my "*instructions,*" &c. I directly perceived that my position threatened to assume a new character, one foreign to the terms of my appointment, as explained in my correspondence with Lord Stanley; and having read it through with much attention and care, I could find no kind of reason to induce me to believe that the Secretary of State had ever contemplated handing me over to the tender mercies of a *military* superior.* I reasoned with myself thus: if the Senior Military Surgeon or Principal Civil Medical Officer and his *staff* or coadjutors have

* I have here subjoined a copy of that portion of the said "correspondenee" which refers to my official position:

"Downing street, 15th May, 1844.

"Sir,—I am directed by Lord Stanley to acknowledge the reeeipt of your letter of the 10th instant, inelosing a note from Dr. Davey, aeeompanied by eertifieates from the resident physician and visiting justices of the Hanwell Lunatie Asylum as to his qualifieations to undertake *the superintendence of a lunatic asylum at Colombo.* I am to inform you in answer, that Lord Stanley eonsiders these certificates as quite satisfactory, and will aeeordingly appoint Dr. Davey to the situation.

"The emoluments, &c.

"I return, herewith, Dr. Davey's certifieates, as Lord Stanley eonsiders that it may, perhaps, be agreeable to him to present in person to the *Governor of Ceylon* testimonials so highly ereditable to him.

"I am, &c., (Signed) Jas. Stephen."

N.B.—The preeeding was inclosed to me in a letter from G. Baillie, Esq., Colonial Agent, whieh eontained only an abstract of the same.

hitherto so much and shamefully neglected the condition of the lunatic* as to call for the special interference of both private individuals and the government of the colony, surely *he* can be in no position—intellectually or morally considered—to direct my movements or to control my acts; my experience has not been his nor his experience mine—and on this account it is I am sent to Ceylon. If it were or had been the pleasure of the Secretary of State to subject me to a medical superior like this, one so strangely conjured up, surely he would not have sought a person where he did me, viz. at HANWELL; nor would he have awarded to a medical officer holding a comparatively inferior position, a larger and more liberal salary than that received by his superior,† a kind of reasoning I considered then, as I do now, conclusive. However, nothing daunted, I determined to keep steadily before me the object

* The plea of *ignorance* can avail nothing here; for however ill informed a medical man may be of the modern and scientific treatment of the insane, neither he nor any one else can claim to be excused the proper use of soap and water. Any old lady knows how to preserve cleanliness, and to guard against the horrors of long accumulated filth and dirt.

† The salary of the Principal Civil Medical Officer for *civil duties*, independently of his military position, is £300 annually; whereas my own was, as *Superintendent of the Lunatics*, £800 a year. Although public opinion in Ceylon by no means favours so much, yet do I hope the other *civil duties* of this functionary have been, and are better performed than those exclusively appertaining to the lunatic department, else does a heavy responsibility rest with the government.

of my mission to Ceylon, and despaired not, by a proper conciliation, to work all things to the advantage of my unfortunate patients.

Never, never can I forget the impression made on my mind on first visiting the lunatics in confinement at the Leper Hospital and at the Hulfsdorp Jail. Such misery, such squalor, such neglect, I had never seen before. My mind naturally reverted to my past experience, and my imagination recalled certain shadows of horror and dismay I had some six years previously witnessed in the discharge of certain duties belonging to my office as surgeon, under the new Poor Law Act; but the scenes then presented to me were as nothing in comparison with these at Colombo. One would have thought the wretched inmates of the miserable hovels or cells had been sentenced to die by the falling of the walls and roofs about them, so rotten and insecure were they; that is, if the patients ever managed to survive the exaggerated physical discomfort which everywhere surrounded and oppressed them. I should be sorry, indeed, to be supposed to cast the least discredit on the Medical Sub-Assistant in charge—*in December*, 1844. His general ill health and physical infirmities must plainly excuse him. He ought not to have been put in charge of the lunatics at Hendelle, for they, much *more* than other patients, require the attention and care of their supervisors.

On the retirement of Mr. Rose, and the appoint-

ment of his successor, my first care was directed to the *diet* of the patients. The plan then adopted with respect to the supply of provisions to the government hospitals was a very singular one. The government allowed for each inmate twopence farthing per day, and twenty measures or forty pints of rice monthly: the rice was received from the commissariat department, and the twopence farthing was advanced to the Medical Sub-Assistant or resident Medical Officer in charge. A month's advance for each patient amounted to a total equal to the number of days in any given month multiplied by $2\frac{1}{4}$, and this sum again multiplied by the number of patients under treatment realized the month's expenditure—independently of all casualties. This advance for the month made to the Medical Officer was disposed of as he thought best, and the patients were, as a matter of necessity, greatly subject to his individual discretion or pleasure. From the very ill, emaciated, and exsanguine appearance of the patients at the Leper Hospital, both the insane and leper, I could do no less than conclude that the servants (who, I regretted to learn, were not then dieted by the government) dealt in some way unfairly with their food, and that the feeble health of Mr. Rose had prevented that gentleman detecting them in such a practice. By care, attention, and foresight, I succeeded, after some little time, and with the aid *then* afforded me by Mr.

Dickenson, a person who was for many years at Hanwell, and who was sent to Ceylon in the capacity of first male attendant, in obtaining for the inmates of the establishment, though with the same funds, viz. twopence farthing a day per head—exclusive of the rice—a very improved diet, both as it regards *quantity* and *quality;* and the good effects of this single proceeding were quickly made palpable to the senses of even the most superficial observer; both the lunatics and lepers improved greatly in appearance.* In 1845 the *mortality* diminished considerably; for whilst in 1844 it amounted to 33·3 per cent., in this year it was reduced to 23·7 per cent. The cures were 0 in 1844 among the lunatics at the Leper Hospital, whereas in 1845 they amounted to 31·6 per cent. These and the succeeding facts contained in these pages, and each one to be proved by documents in the keeping of the Principal Civil Medical Officer, or Senior Military Surgeon, I recommend to the attention of those numerous and anonymous scribblers in the 'Ceylon Times,' who, in common with its editor, have so far forgotten the legitimate use of a free press as to make it the mere instrument of their own personal ill-nature. But to proceed with a more wholesome and agreeable subject.

However encouraging were the good effects of

* For confirmation of this statement, the 'Clinical Register' for 1845 is referred to, for the satisfaction of those who have this document within their reach.

my attention to the *diet,* it was not forgotten from the first to give the patients all the comforts and advantages which attend on *cleanliness,* and of which even the native servants themselves became, in a short time, fully sensible. With the kind co-operation of Mr. Rose, they (the servants) were at length made to understand my wishes and views with regard to the patients; their duties to them were explained, and they were encouraged and *taught* to substitute all kinds of harshness and unkindness for a persuasive and conciliatory demeanour. I wrote certain rules and regulations, which I was in the habit of reading and explaining as occasion seemed to warrant, and a few of these are now contained in my own handwriting in the common day-book of the Hospital. So far as the employment of mechanical restraint is or was concerned, I lost no time in demonstrating in what way it may be best abandoned, and after the adoption of some kind of classification of the patients, insane, lepers, and others, it almost ceased to be remembered. It was reported to me on taking charge of the lunatics, that about one third of the whole number of them were generally in some kind of restraint.*

* I could not but regard it as a very singular circumstance that but a few of the patients at Hendelle were correctly registered. I found it necessary to make an entirely new return of the patients and their diseases to the Principal Civil Medical Officer. The words amentia, mania, monomania, &c., were employed more by accident than anything else. It probably was not *so* managed elsewhere, but the Principal Civil Medical Officer will best know.

The well-being of the patients was, in no slight degree, promoted by cleaning and clearing the yards about the premises, and draining the same when and where needed, for these I found almost choked up with rubbish and dirt, of one kind and another; supplied for the most part by the unoccupied and falling portions of the building. The Surveyor-General kindly came to my aid and ordered the erection of a wall between the male and female sides of the establishment, as well as the completion of certain unfinished cells; and which in due time I found of great assistance and use to me.*

The increased facilities of *classification* so afforded were productive of much quiet and comfort to the insane. A variety of small alterations and amendments were made about the premises, each one productive of some kind of advantage; and these

* These *cells* I found in the course of erection when I arrived at Ceylon; each one was supplied with a grating in the floor, opening into a drain common to them all, the roofing was so low as to be easily reached by the patients, and the only means of admission of *light* and *air* were through a small grating over the door, and another in the back wall of the apartment, *about five feet from the ground.* The doors of these cells opened into a narrow verandah only. The parties most concerned expressed much surprise and incredulity at the objections I made to the building, and nothing bothered them so much as the idea of putting *lunatics* into places without a sink of some kind, nor could I impress their minds with the necessity of providing apartments of a more cheerful character. I may add that at the new Asylum much fault is found with the "windows," because they are so constructed as to allow the patients to see through them, and enjoy as much as they can the objects without.

together paved the way for the reception of the lunatics hitherto confined at the Hulfsdorp Jail, to which place attention has been already drawn. To make room for these poor creatures, I succeeded, after repeated solicitations, and much correspondence with the Senior Military Surgeon, or Principal Civil Medical Officer, in obtaining his authority for the discharge of those who were neither leprous nor insane from the "Leper and Lunatic Hospital," to the *general* or "Pauper Hospital." The separation of the lunatics from the prisoners at Hulfsdorp I set my mind upon, directly I arrived in Ceylon, and had become acquainted with the disposition of things; but for the many delays and dilatoriness which preceded this important step, I was by no means prepared. However, by July 1845, I had collected the insane together at Hendelle. Both the Committee of the Legislative Council, and the Jail and Hospital Committee recommended, in their respective Reports in 1843 and 1844, to the government the immediate removal of the lunatics from the Hulfsdorp Jail, and "that they, the insane, should be all united to the establishment at Hendelle," *and the latter strongly urged the same and repeatedly so,* but with what effect is here plainly seen. The separate accommodation of the insane, moreover, is a matter which appears to have been well appreciated by both of the committees named, but what is, I think, strange, they both express a decided pre-

ference for HENDELLE as a *site* for the new Lunatic Hospital, at that time only in contemplation.* In fact, I found on my arrival, the question of "*site*" quite decided in the minds of those most concerned in the matter. *The Principal Civil Medical Officer* fully agreed with the gentlemen of the above-mentioned committees; and so was there an end to it, to all appearance.

But on becoming acquainted with the suburbs of the town and their facilities, &c., I could not do otherwise than look at *Hendelle* as a very objectionable position for the new Lunatic Hospital; and with this impression on my mind I felt it my duty to write to the Government on the subject. The following are extracts from my letter to the head of the Medical Department.

"I am completely induced to believe that the proper site of the Lunatic and Leper Hospital,† proposed to be erected, is in the cinnamon gardens near to the Jail, and *not* at Hendelle. My reasons for entertaining this opinion are these:

* The opinion of the Jail and Hospital Committee, as expressed in their Report, was afterwards much changed, inasmuch as they expressed themselves favorable to another site, recommended by Mr. Wodehouse, on which it was suggested to build a *General Hospital*, with wards for the lunatics and lepers attached.—See Correspondence, dated *April* 1845.

† It was originally intended by the Government of Ceylon to provide for both the lunatics and lepers in the same establishment. I am happy to add, they were induced, at my earnest and repeated solicitations, to abandon this arrangement.

"1st. The great distance of Hendelle from Colombo.

"2d. The intervention of the river.

"3d. The contiguity of the hospital to the river.

"4th. The isolated character of Hendelle.

"None of these objections apply to the site I here propose for consideration. It very evidently embraces all the advantages of Hendelle, without its disadvantages. The locality is equally healthy, the capabilities of drainage no less complete.

"As regards the distance of Hendelle from Colombo, no public building, I think, should be far from a town. When within an easy and agreeable distance it is sure to be an object of interest and care. Abuses, of whatever kind, are not only more certainly and quickly removed, but prevented. Facility of communication is of vast importance, for a multitude of reasons so easily conceived, that I need not trouble you with their recital here.

"The intervention of the river is doubtless a very serious objection, and more than an equivalent to an increased distance of several miles; the trouble and danger, too, which must attend, in many instances, on crossing the river with lunatic patients, I cannot but consider as very strong objections.*

* During the rainy seasons at Ceylon, the ebb current of the Kalani Ganga, the name by which this river is known, runs at the rate of nearly seven miles an hour. I have been on many occasions so long as thirty or forty minutes crossing to the hospital, although the breadth of the river there hardly exceeds 200 yards.

"The isolated character of Hendelle is but too well calculated to aggravate every symptom of mental disease. No class of individuals so much requires mental occupation and agreeable and various excitements as lunatics, to keep in *use* and health their normal faculties; no less than to moderate the *abuse* of those which may be disordered."

The *Principal Civil Medical Officer* never took any kind of notice of my recommendation, but merely told me casually, he did not agree with me—he felt satisfied about the *site*. Hendelle was the only place to be thought of, "*it was well out of the way.*"* At the time I wrote this letter above quoted,

* For the same reason it was, I apprehend, this gentleman so strenuously exerted himself with the Colonial Secretary, though in vain, to get me and my family, *including the assistants sent out with me by the Secretary of State*, sent over to *Hendelle*, on my and their arrival in Ceylon. My readers may have seen what is called a knacker's yard, or the premises of a dealer in marine stores; whatever either of such horrid places may be deficient in misery, disorder, and filth, *Hendelle* (such as it was) faithfully supplied, and *here were I and my family and two female subordinates* to be immured at the pleasure of the *Senior Military Surgeon*. We were to have been located in what had been the apartments of the native medical sub-assistant, which consisted of three rooms, two of which were barely large enough to contain a good-sized bedstead, and the whole in the most dirty, insecure, and dilapidated state it is possible to imagine, even among purblind colonists.

It is true certain *alterations* and *additions* were suggested as necessary; but of the former such *only* could be required which embraced the complete erasure of every stick and stone on the entire premises. Procrastination was still the order of the day in

I was ignorant of all which had previously passed on the subject of the *site* of the Lunatic Hospital, either on the part of the committees named or of the Legislative Council. It is some satisfaction to find that, however much I have inadvertently opposed the recommendations of various gentlemen whose opinions generally are entitled to the best respect, Mr. Anstruther, the former able Colonial Secretary, so fully agrees with me, as he is represented to do in the following observations, extracted from a speech of his delivered at the Council Chamber, in October 1843 :

"The present site of the Leper Hospital, at Hendelle, as a place of confinement for lunatics, is very objectionable, for, from its situation, inspection is impossible. The Council are aware that it is situated on the other side of the river, consequently it is very difficult to get at, and impossible to do so without all parties knowing that a visitor is coming.

Ceylon; to temporize was the spirit of the times in this department of the medical service. As may be expected, I was little prepared when I resigned my appointment at Hanwell to take up my quarters in a *jungle*, and such a jungle as the Leper and Lunatic Hospital so called stood in.

So extraordinary were Dr. St. John's opposition and enmity towards my appointment and myself, that I once asked him to tell me the cause and nature of his *personal* dislike, and strange and unremitting persecution; he declined to reply to me. I luckily succeeded in counteracting the petty despotism of this person; thanks to the kind interference of the late Sir Colin Campbell, to whom I complained.

It is very well known what danger there is of the unhappy inmates of such establishments being ill used in all countries, if there are not the means of vigilant inspection. The government therefore consider that the new Lunatic Asylum should be so situated as to render frequent inspection necessary."

Mr. Anstruther concludes by recommending that the Jail then building on the high ground, to the back of the Cotta road, should be converted into a lunatic hospital, and another *site* chosen for it—the Jail; and "*near*" this building it is my communication, addressed to the Principal Civil Medical Officer, advises the erection of the said institution for the insane. After the preceding, one could hardly be prepared to learn that the preference awarded to Hendelle was, at any time, in virtue "of *its local advantages*," or of "*its secluded position*;" however so it was. I may add here, it is quite out of my power to understand how the *Jail and Hospital Committee* should feel convinced that "*the situation of the Leper Hospital is too far from* COLOMBO *to secure regular daily visits of competent surgeons*,"* and yet consider *Hendelle* as the preferable site for the new

* It is a matter of no small surprise to me that the various official reports presented to the Colonial Government in 1843-4-5, respecting the lunatics and their accommodation, &c., should have been at no time submitted for my information and assistance. It is but a few months since that I became acquainted with their contents, and then only through the kindness of private individuals who had preserved *copies* of such.

Lunatic Hospital; for the committee does not so much as allude to the necessity of a *"competent"* medical officer residing on the premises.

The question of *site,* which my communication raised in the minds of the late Governor and his Council, had the effect of delaying for a long time the commencement of the new asylum, the earnest necessity of which was so earnestly and repeatedly brought before the attention of the Principal Civil Medical Officer and the government both by myself and others;* and it was not until after repeated interviews with the late Sir Colin Campbell, and with various members of the Legislative Council, that anything was decided in relation to it. The very beautiful plan which was prepared by the resident engineer at Hanwell, Mr. Harris, was directly rejected because it was too extensive and complete, and more expensive than the state of the colonial funds would justify. The fact is, the proposed Lunatic Hospital and myself were alike voted a bore—neither it nor the *Superintendent of the Insane* were at all understood; the utility of both were doubted; and some hopes were entertained and encouraged that I should take myself and my assistants off to England. I was led to expect as much at the hands of the government.

After a long interview with the Governor on one

* Vide Reports and Correspondence.

occasion, I was desired to write to the Colonial Secretary, and explain my views, &c.; and I lost no time in forwarding the following letter:

"Hendelle, May 27, 1845.

"SIR,—I have the honour to forward to you, at the request of his Excellency the Governor, the following reflections on the proposed Lunatic Hospital at Colombo, and its general management, &c. The grand object to be kept in view in the construction of any kind of hospital, is the cure of its inmates; and with this view it is necessary to leave undone nothing that can in any way contribute to the health and comfort of the patients. Such can only be promoted and secured in a commodious and well-ventilated building, on an eligible site,—one commanding the facilities of a complete and efficient drainage, with its internal and domestic arrangements in that perfect state of order which experience shows is indispensable to the object concerned.

"As regards the *site* of the proposed hospital for the insane, it is my opinion that it should be *within* two miles of the Fort, and on an elevated portion of ground commanding a wide and various prospect. A short distance from the Fort, like this proposed, whilst it secured the necessary facilities of communication, would be found sufficiently distant to preserve the purity of the atmosphere about the building, and its consequent wholesome ventilation.

"A *Lunatic Hospital* should on no account be built without the reach of an easy communication with a town, for innumerable reasons. The visits of the friends of the patients are oftentimes desirable; the communication of the insane with the visitors to an hospital for their reception is not less frequently attended with much good. The religious instruction and direction of the minister of religion are commonly (in certain cases of mental disease) among the most valuable of remedial means. These advantages, and many, many more, the mere mention of which would be tedious, are in a very general way available in proportion to the facilities of communication between the hospital and the town. The cure of the lunatic is effected more by the judicious exercise of the healthy mental faculties, wholesome bodily employment, a good and nourishing diet, and personal comfort, than by the old and indiscriminate practice of bleeding, blistering, and mechanical restraint, which, until these few years, constituted even the *European* practice. It is directly seen that the former kind of treatment can be more easily adopted in a locality which, from its contiguity, prevents everything like delay and procrastination, than in one of another kind.

"The interior arrangements of a lunatic hospital must be convenient and commodious, and in every respect adapted to the *cure* of its inmates. There must be airy and commodious sleeping apartments,

of various sizes, containing from one to four or five (and never *two*) beds; there must be a bathing-room, a large commode-room, a store-room, and an attendant's apartment in every ward. These rooms must all open into a spacious and lofty gallery, of a length proportionate to the number of the side apartments. The opposite side of this gallery or ward must communicate with a court-yard, which must be inclosed, to effect the proper *division* or *classification* of the patients; this is immensely important. The attendants themselves must be classified according to their natural dispositions and capabilities, and put into the particular wards wherein are the patients suited for their care. The attendants on the insane are to the patients what nurses are to the children under their charge, and they never are required to do else than to converse with, to soothe, to amuse, to instruct, to advise the patients: such are their exclusive duties, including, of course, the necessary attention to their domestic comforts and to the medical directions. Every ward, moreover, has what is called a "day-" or "dining-room." Occupations and diversified amusements are provided, suitable to the different habits of the patients, in all institutions of this kind at home. No ward should be made to contain more than twenty or twenty-five patients. Each ward is to be regarded apart from every other—the patients in one must never associate with those of another. The strict

classification of the insane is of paramount importance. The domestic and general duties of every establishment for the insane, as cooking, washing, &c. &c., are performed by servants engaged for the purpose, who never hold any communication with the patients. Every servant should be dieted by the establishment. In the management of an insane hospital, everything, including diet, exercise, recreation, or amusement, employment, classification, &c. &c., is regulated with a view to the restoration of the patients. Such means, and the others in use, are to the physician engaged in the cure of the unhappy lunatic, what the surgeon's instruments and mechanical appliances, &c., are to him.

"Every institution for the reception of the insane at home is governed on precisely the same principles which I have conveyed in the preceding brief observations; and for the past four years of my life I have been uninterruptedly engaged in their practice in the most extensive,* and it is said the best-conducted, institution of the kind in the *world;* th example of which is at this moment changing the destinies of the lunatic far and wide.

"In reference to the expense of the building, very much must depend on its size and this must be

* Hanwell Asylum has 1000 insane patients in it; the cost of each is about 8*s.* weekly. The cures have increased, and the number of deaths diminished, in proportion to the adoption of the new treatment.

determined by the number of insane to be accommodated. I find, by referring to the Reports of the County Lunatic Hospitals at home, that the Bedford Asylum cost, for building, furnishing, and land, £20,500, and that it accommodates 180 patients. The Nottingham Asylum cost, for building, furnishing, and land, £36,800, and has accommodation for 170 patients. The Stafford cost, for building, furnishing, and land, £36,500, and is calculated to accommodate 120 patients only. The Suffolk cost £32,000, and accommodates 180 patients; and the Norfolk cost, for building, furnishing, and land, £50,000, and has accommodation for 220 patients. The average cost per patient in these several pauper lunatic hospitals at home has been, up to the present time, £189 10*s*. The first purchase of land has been, in each of the above instances, heavy, and inasmuch as this serious expense would *here* be avoided, a considerable pecuniary benefit must result. The average quantity of land belonging to the above institutions exceeds twenty acres. I learn, from numerous and diversified inquiries, that there are in Ceylon as many as four or five hundred lunatic patients, and that of this large number there are only about 120 or 130 in confinement. The remainder have their liberty until, like M'Naughten, who killed Mr. Drummond, they are guilty of some act of violence, when their friends or relations solicit their removal from home, and, by this time, the

chances are—they are *incurable.* The heavy and continued drain on the parochial funds at home, which attends the neglect of *recent* cases of insanity, has caused the attention of the Commisioners of Lunacy to be directed to the claim of the charge of every lunatic from his relatives and friends, in order that they may compel his or her removal to some suitable institution. The neglect of this precaution it has been which accounts for the Middlesex county having to support about 1500 pauper and incurable lunatics, of which number at least two thirds may be said to have been *curable* on the first invasion of the disease.* I must add, that should the proposed Lunatic Hospital be built, it must never be regarded as a place of *cure,* if the same system of management should prevail which is now in existence at Hendelle.

"From the improved state of the lunatic patients at Hendelle, I feel satisfied that the insane native poor of Ceylon are capable of the same amelioration, *in every sense,* as the pauper lunatic of England. If the lunatics in the *lowest* walks of life at home be thought to require an hospital for their reception and cure, it seems plausible to think that the same should not be refused those poor natives of tropical countries who may happen to be afflicted with a

* This fact is seen to be immensely important; it suggests both the propriety and economy of the care and responsibility of the insane being made to rest with others than the relatives and friends of patients.

disease so calamitous as insanity, provided there exist the indispensable pecuniary resources to meet the required outlay.

"The substitution of the accomplished physician for the ignorant keeper, is all that the *lunatic* requires to rob his disease of that mystery and horror which have, to within these few years, had the effect of depriving him of those scientific remedial means which the sufferers from all other diseases have ever been allowed them. I have, &c.,

(Signed) "J. G. Davey.

"The Honorable the Colonial Secretary."

The reply I had the honour to receive was to the effect that, however anxious the Government may be to ameliorate the condition of the lunatics in Ceylon, its resources would not allow of so much as I seemed to anticipate. *I was requested to advise further on the subject.* A certain unwillingness was shown to abandon *Hendelle* as a site for the new Lunatic Hospital, because of the late erection of the new "*cells*," before mentioned in these pages. To the reply of the acting Colonial Secretary I sent the annexed.

"Colombo, June 3, 1845.

"Sir,—I have the honour to acknowledge the receipt of your letter, bearing date 27th May, and in answer to it I beg to observe that the commands of his Excellency the Governor, to apply myself to

consider in what manner it will be most proper for the Government to proceed for effecting the object you have explained to me, shall be scrupulously obeyed.

"I would therefore take the liberty to observe that until the new building is complete and ready for the admission of patients, it is, I think, desirable that the lunatics at the Jail at Hulfsdorp should be accommodated at Hendelle; the completion of the new apartments thereat, and the removal of certain other patients therefrom, which has been lately effected, will, together, allow of their accommodation at Hendelle. It is important also, that Miss Prowett, the Matron, or first Female Assistant, should be at Hendelle as well as Mr. Dickenson. I fear that he could hardly be expected, putting the indelicacy of the thing on one side, to give his attention to the females, whether patients or servants, and at the same time to discharge his other duties. Should those at the Jail be removed to Hendelle, there will be then 74 patients, of whom 56 (I believe) are insane. Little can be *expected* at the present from the servants but the commonest and meanest offices, in the discharge of which their whole time seems engaged. The presence of a female assistant, by dividing the care of the two sides of the establishment, would, no doubt, prove an important matter. Miss Prowett's services, moreover, can only be rendered available by her residing on the premises.

The outlay of a very few pounds would, no doubt, be sufficient to prepare the apartments lately occupied by the Medical Sub-Assistant for Miss Prowett.

"It is important to be known, that the new rooms or '*cells*' at Hendelle, '*on which a considerable sum has been expended,*' are so constructed, that they could *not* be worked into a new building without undergoing so thorough an alteration that 'the outlay' must be regarded as having secured only a *temporary* advantage.* Should the proposed Hospital for the Insane be built at Hendelle, I do not see even then that 'the outlay' can in any way be recovered.

"I have, &c.

(Signed) "J. G. DAVEY.

"The Honorable the Colonial Secretary."

The all-important question of the site being at length decided—but not until after much opposition and cavilling—the Surveyor-General (F. B. Norris, Esq.) lost no time in commencing operations.

The plan adopted, to which the reader is referred, is a modification of that one prepared by Mr. Harris, and to which reference has been already made. It has been very roughly criticised in Ceylon, but its advantages and defects will be, herein, duly considered as I proceed.

* "It must always be remembered that the want of a properly constructed building, erected especially for the insane, constitutes an obstacle almost insurmountable to the introduction of improvements of any kind."—CONOLLY.

Keeping in mind my former instructions from the Government, to "*apply myself to consider in what manner it will be most proper for the Government to proceed for effecting the object in view,*" viz. the amelioration of the insane, I wrote the following, and sent it to the address of the Colonial Secretary:

"Colombo, December, 1845.

"Sir,—In May last I had the honour, at the request of his Excellency the Governor, to communicate to you, in as 'brief' and 'concise' a manner as possible, my views, &c., regarding the proposed Lunatic Hospital at Colombo, its site, general construction, management, &c. In your reply I am informed that although 'it was quite beyond the resources of this Government to attempt at the present the establishment of an institution upon any scale approaching those of the great establishments of the kind in England,' yet 'that much might be done to improve the condition and treatment of the lunatics in Ceylon, in which my 'experience' and 'talents might be of the greatest assistance.' You observe, moreover, 'the Governor hopes that, under the conviction of his inability to meet your views to their full extent, you will apply yourself to consider in what manner it will be most proper for the Government to proceed for effecting the object in view.' In answer to which I had the honour then to recommend that until the new building for the reception

of the insane is complete, and ready for the reception of patients, that Miss Prowett (lately resigned) should be provided with accommodation at Hendelle, where she could divide the duties of the Male Assistant, and also that the lunatics at the Jail should be removed thither. Now that the site of the Lunatic Hospital is agreed to, and that arrangements are in progress to commence building, it is perhaps time that I should so far anticipate its completion as to submit to you in detail, for the consideration of his Excellency the Governor, some further observations on its management and direction, in the hope that they might tend *'to improve the condition of the lunatics in Ceylon.'*

"In the plan of the hospital which I have submitted to the Surveyor-General, it has been my endeavour to secure such general arrangements as would unite both economy and utility. In it I have been, as desired of me, at some pains to keep myself within the prescribed bounds, at the same time that I have taken care to preserve such a principle in the construction of the building as to allow at any future time such additions and alterations as might be considered necessary to meet the views of another day. By referring to the said plan, it is perceived that the number of insane wards (three) on either side of the building will allow of some *classification* of the patients, both male and female. Without the classification of the insane very little success can be

expected to attend any means of cure or relief which may be employed. It is the want of a classification of the patients at Hendelle which is productive of so much discomfort; the mixing together of the noisy and quiet, the clean and the dirty, the dangerous and the inoffensive, the curable and the incurable, cannot possibly be else than objectionable. The single rooms which are provided on either side of the building, will be found of great advantage, and productive of much comfort among the patients; and without which the occasional *seclusion* of a patient would be rendered impossible. *Seclusion*, in the words of Dr. Conolly, is but the removal of a patient to the tranquillity of a quiet bedroom, from the noise and excitement of surrounding objects. It is only resorted to when the patient cannot be at large with safety or comfort to himself or to others, and when he is not in a state to be influenced by persuasion or conciliated by kindness; and it is only continued until the temporary excitement has subsided and the danger is past. In extreme cases the protection of the patient is further secured by his being placed in a room of which the floor is a bed, and the four walls are padded. Seclusion has the same soothing effects on the maniac as the removal of any source of annoyance has on the feelings of a sane man. The galleries (verandahs), into which the sleeping apartments enter, in accordance with the observations made in my first letter, are intended to serve the

purpose of day-rooms, in which—in the absence *only* of distinct dining-rooms and workshops, which latter should be in the rear of the building, and each one under the direction of a sane person, used to the trade or employment therein carried on—the patients may take their meals, and be found employment and amusement, when the state of the weather prevents them from being in the grounds. In an English hospital for the insane these galleries are furnished with chairs and stools, and tables, including, too, draught-boards, backgammon-tables, &c. &c. Periodicals and a variety of books are found for the patients. The grounds or court-yards attached to the several wards, and with which they communicate, should be planted with trees of spreading foliage, and each one furnished with a large and open shed, to protect the patients from the sun and rain. At Hanwell some of these court-yards have been converted into gardens by the unaided labours of the insane. As regards the employment of the insane here, much could be done if the servants were of a better class. A middle-aged woman at Hendelle, who more than half her time used to be in mechanical restraint for tearing her clothing, &c., has been for months past so benefited by being employed in making coir rope and in platting, that she is wholly unlike what she was. Occupation is at all times among the most valuable of remedial means in insanity. If the lunatic be left to pass his time listless

and unoccupied, or occupied only with the delusions that disturb him, and which thus, being diverted by no amusement nor employment, in the course of time become strengthened, and all hope of his recovery ends. This is precisely the case with almost all the poor people at Hendelle.* The proper classification, employment, and amusement of the insane are to the physician engaged in their treatment what the scalpel is to the operating surgeon. Medicine is, of course, of use to both, but as an auxiliary only.

"It may be said, that in the care and management of the insane, we must keep three objects in view :

"1st. The patient's safety and restoration to health.

* The lunatics in Ceylon can never be really and permanently benefited until they are found with employment. The commissariat department now stands in the way of such a measure, and must of course do so, so long as the lunatic hospital is supplied from it with the various articles of apparel, &c., in use by the patients. At home, whatever is used in a lunatic hospital is there made by the patients, under the direction of proper persons. A great variety of trades and handicraft are introduced as remedial means; employment being a grand auxiliary in the non-restraint plan. The present listless and apathetical state of the patients generally at Hendelle in itself counteracts in a serious degree the little good that otherwise may be effected. Moreover, the services of the artisan in a lunatic hospital are commonly no less indispensable than those of the physician. In the absence of chains and manacles, immediate resource must frequently be had to various ingenious contrivances in the matter of dress, bedding, general accommodation, &c., which renders the assistance of such persons indispensable.

"2d. Their comfort and well-bcing, whether curable or not.

"3d. The security of society.

"And with regard to the first-named object: a well-arranged and commodious building is indispensable, with its doors and windows so contrived as to combine security with the facility of ventilation and inspection. The doors of all the rooms should be made to open outwards; they should shut with a spring-lock, and be provided with inspection plates. No windows nor grating should be left unprotected by a wirc blind, which allows the passage of the air, and cffectually prevents the patient from suspending himself.

"The general safety of the patient being provided for, the various means of cure come next to be considered.

"It is, however, sufficicnt for me to observe here, that an unvarying kindness and sympathy towards the insane must, under all circumstances, take the lead of whatever remedial means are employed. The restraining, persuading, engaging, and teaching the darkened and disordered mind are practicable only in those institutions where coercion is unknown and mechanical restraint forgotten. I think it right to take this opportunity to obscrve, that thc *diet* of the lunatie requires to bc generous. Insanity is a disease of dcbility, and as a general rule it follows that the remedies most beneficial arc of a tonic kind. I mention this more particularly, bccause I havc,

strange to say, been censured for ordering *wine* for the lunatics at Hendelle.

"It must appear quite evident to every reflecting mind, that the comfort and well-being of the patients in a lunatic asylum can be secured only by a judicious disposition and regulation of the household, officers and servants; without this no kind of duties can be either properly or efficiently discharged. Whatever may be the advantages in the construction of the hospital, whatever may be the zeal and talents of the physician or superintendent, and however various and desirable the details of the establishment, as they may affect the classification, employment, amusement, and general management of the patients, if it should unfortunately happen that the household, from the physician to his immediate assistants, the house-steward and matron, and on through the attendants and domestic servants, &c., is not well and systematically arranged, nothing can be expected to proceed as it ought to do.

"The following are presented to you as 'aphorisms;' they are to be understood to explain the practice everywhere adopted in Britain at public lunatic hospitals.

"1. All public asylums should be placed under the superintendence of a resident physician, who will direct the moral and medical treatment, and be responsible for the *medical* management of the institution.

"2. The superintendent should have the recommendation of all his subordinate officers, and the power of dismissing them for misconduct, on reporting his causes of complaint in the proper quarter.

"3. The male and female attendants should be appointed by the medical superintendent.

"4. The superintendent should have no financial duties or responsibilities; the economy of the institution should he confided to the steward, under whose direction will be placed the necessary subordinates.

"5. The steward will be responsible for the financial department, and render his accounts in a series of books, which will allow the expenditure to be checked with facility.

"6. The steward will receive from the medical superintendent all orders regarding diet, clothing, treatment, &c., in short, in every duty connected with the management of the patients.

"7. The matron or first female assistant should direct the duties of those under her, on the female side of the hospital. She should be held responsible to the superintendent that his instructions are carried out concerning the female patients; that their meals and tasks be properly distributed; and their personal comfort and cleanliness attended to, &c.

"8. The attendants—male and female—on the patients must on no account be concerned in the

discharge of any common or servile duties; they should be required only to converse with, to soothe, to amuse, to instruct, to advise the patients, as well as to attend to their domestic and general comforts, and the medical directions.

"9. The several domestic duties, as washing, cooking, &c. &c., must be discharged by servants expressly engaged for such several purposes, who must of course be held responsible either to the steward or matron, according to their sex.

"It is a common practice at home to have two or three different classes of attendants, male and female, in which they progressively rise according to their behaviour. They are not generally of the class of *servants*, but much above it. Much pains have been and are taken to secure the services of a superior class of attendants, by the offer of liberal salaries and personal comforts; it has, moreover, been proposed that after a certain period of service they might be allowed to retire upon some provision for their latter days. Even schools for the practical instruction of attendants on the insane are to be found at home. Inasmuch as the patients at Hendelle have no attendance supplied to them but that which is given by the native servants, whose time is almost incessantly occupied in domestic drudgery, we are supplied with additional evidence of how much remains to be done for the insane poor of Ceylon.

"Institutions of the kind being considered are at home presided over by a committee of magistrates, chosen from the county in which the asylum may be placed. The committee meet occasionally to transact business, to receive the reports of casualties, and of the physician; and to examine the accounts of the house steward, &c. &c. It has occurred to me, that the best and only plan to adopt here would be to obtain the services of the Jail and Hospital Committee, from whose members the Government should receive its reports and accounts of the Lunatic Hospital.* In this case the Government here would hold precisely the same relation to the said Committee as the body of the magistrates of Middlesex for instance do to the Hanwell committee; or, in other words, the Jail and Hospital Committee would then be as responsible to the Government for the disposal of its funds, &c. &c., as the Hanwell committee is to the magistracy of Middlesex, of which it, the committee, is a part.

"In my first letter I spoke of the '*security of society*' from the uncontrollable pursuits and propensities of the insane. The observations therein made derive confirmation from a circumstance which has since occurred at Colombo, viz. the murder of one unfortunate human being by another, and that other a lunatic.

* This "*plan*" has been adopted of late by the local Government of Ceylon.

"As but a part of the whole number of the insane could be received into the new hospital, when it is completed; and as, moreover, the admission of the lepers into it, as I regret is contemplated, must exclude yet more insane from within its walls,—there is much reason to wish that the lepers might be allowed to continue at Hendelle. It is not at all necessary to provide for them as for the lunatics. The presence of the lepers at the Lunatic Hospital would be an exceedingly objectionable arrangement, and would be regarded as such by every European authority.

"If, as I have remarked in my first letter, the cure of the lunatic is effected more by the judicious exercise of the healthy mental faculties, by wholesome bodily employment, a good and nourishing diet, and personal comfort, than by any other resources; and if, as I believe, the observations expressed in this and my former letter contain the ways and means whereby alone all such objects can be promoted, I do hope they will not be allowed to pass unheeded. However 'qualified' I may be, 'by habit and education, to undertake the management of a lunatic asylum,' and however 'earnest the desire of this Government to do as much as lay in its power to ameliorate the condition of the lunatic patients in the colony,' to quote the words of your letter of May last, it cannot be supposed that I can be of any *real* benefit to the poor people at Hendelle. Unless in cases of bodily illness and accident, it is

out of my power to do much; and certainly not more than any subordinate of common sense and accustomed to the insane. The want of all the resources, both of art and science, at Hendelle, will be manifest to any one who only reads this letter. Nevertheless, all whose experience enables them to compare it with what it was, confidently assure me it was never so much less miserable as it is now. I must decline offering an opinion.

"I think it proper to add, that the foregoing views are by no means intended to convey more than a limited idea of the manner in which lunatic hospitals are generally conducted in Europe. They are rather given to express my opinion of what may be expected to be done at the present time, '*to improve the condition of the lunatics in Ceylon.*' If I were to call your attention to the organization of schools for the insane, if I were to recommend the appointment of schoolmasters and schoolmistresses to the proposed Lunatic Hospital, if I were to ask for the appointment of a chaplain, &c. &c., if I were, in short, to plead in favour of the other arrangements which are common at home, then should I expect it to be said that I had shown some haste and precipitation; but with those conversant with things as they are, I am safe from such a charge.

"Although I am assured that the object of my appointment is the amelioration of the insane in Ceylon, and that 'it was with such a view that

application was made to the Secretary of State for the services of a person qualified by habit and education to undertake the management of a lunatic asylum,' I must take the liberty to add, though most respectfully, that whatever my plans of proceeding may be to effect the object herein considered, viz. the amelioration of the insane, and however much the local government may be pleased to countenance them, yet must it be apparent to every one, that so long as my exertions in the good cause which has brought me here are restricted to the limits prescribed by the Principal Civil Medical Officer—that so long as I am called on to obey his injunctions and act up to his wishes and desires—so long, I say, must I be absolved from the responsibility of my *mission.* Its failure cannot then be visited on me. I do trust that the Government will bear this particularly in mind.*

* I have been induced to make this observation in consequence more particularly of a recent official communication I have received, which, in expressing much surprise and regret that I did not visit the establishment at Hendelle "*regularly,*" meaning at stated hours, daily, desires that for the future my "morning visits be made at or before seven o'clock a.m." It is held as an axiom, that the visits of the medical superintendent of a lunatic hospital should be at "*uncertain times.*" How else can he assure himself of the zeal and care of the attendants? How else secure the comfort and well-being of his patients? Or how else check the substitution of some forms of coercion or restraint for that kind attention and encouragement which do more towards the cure of the lunatic than anything else.

In my reply to the Principal Civil Medical Officer, I have

"Hoping that the speedy erection of the new Lunatic Hospital will put me in a position to render services equivalent to my salary, and at the same

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explained more fully. However, the following fact may do more towards proving the necessity of my visits being made at "uncertain times" than mere words could be expected to do. On Wednesday, the 17th of this present month, in consequence of the heavy and continued rain which fell during the early part of the day, I did not, as has been of late my invariable practice, visit Hendelle until nearly *noon;* and I then found several of the patients most improperly secluded in their rooms, undergoing all the miseries of a solitary confinement.

I have, too, three times this last week, found lunatic patients in mechanical restraint; a fact attributable only to the growing negligence of the servants and the assistant, and which can only be referred to the undesirable *regularity* of my visits; for such has not happened before, since I have had the charge of Hendelle. In order to encourage a proper attention to the patients, and to keep in active operation, *as far as present circumstances will allow,* those humane principles of treatment which can alone render both the seclusion and coercion of the insane not only unnecessary, but hurtful, I have not restricted my visits to the morning only, but have gone a second time over in the day; but the erection of the new hospital can alone secure those several means necessary to the end in view, viz. the amelioration of the insane in Ceylon.

Mem.—Inasmuch as this "*official communication*" above referred to has been so lately (even after an expiration of nearly *three* years) referred to, both by anonymous scribblers of the Ceylon press and other *gentlemen* belonging to the medical service of the army, to be mentioned presently, and a character given to it which I think cannot be well demonstrated, I shall here claim the privilege of submitting the same to the reader's attention; premising, however, that the *ipse dixit* of the person then in the capacity of "assistant" to me at Hendelle was, by the Principal Civil Medical Officer, deemed sufficient to inculpate *me,* although

time enable me to be of some real benefit to my fellow-creatures. "I have, &c.

"J. G. Davey, M.D."

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he, the assistant, was, at the date of the succeeding letter, on the eve of losing his situation for conduct which, if expressed here, would probably expose me to an action for libel. The person alluded to *was* summarily discharged by the order of the Colonial Secretary (Sir J. E. Tennent), on my showing such to be necessary.

"Principal Civil Medical Officer's Office, Colombo;
11th November, 1845.

"Sir,—I have the honour to state, that on inspecting Hendelle yesterday, I learnt with equal *surprise* and *regret*, that you are not in the habit of visiting that establishment regularly (you are aware that you were required to visit the wards and patients at Hanwell at least twice every day); and I now request that your morning visits may henceforward be made at or before seven o'clock a.m. I was also surprised to find that the medical registers were removed from the establishment, and request that you do not do so in future, as it is necessary that they should be at Hendelle for my inspection when I visit the establishment.

"I have the honour to be, Sir, your most obedient servant,
(Signed) "C. St. John, M.D.
"Dr. J. G. Davey, "P. C. M. O.
"Supt. Lunatic and Leper Hospital, Hendelle."

Mem.—Up to the period of my arrival in Ceylon the visits of the Medical Superintendent of the Lunatic and Leper Hospital were deemed of so little importance, I am told, that he was rarely seen there oftener than once in two or three months; but the medical service of the army at Ceylon has its local peculiarities.

"November 14 (?), 1845.

"Sir,—In answer to yours of the 11th date, wherein you tell me that you have learnt with 'equal surprise and regret' that I do not visit the establishment at Hendelle '*regularly*,' I have the honour to inform you, that the reasons why I do not do so are these: 1st. In the management of every hospital for the cure of the insane, it is rightly considered by all connected with this de-

Time wore on, the new building at *Marandahn* remained yet unoccupied by the insane. The buildings at Hendelle had reached the climax of insecurity. I

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partment of science, that the visit of the medical superintendent should be made at '*uncertain times.*' I was required at Hanwell to visit the wards at ' uncertain times.' If the visits of the superintendents of lunatic hospitals were made at one unvarying hour, attendants would always be so prepared, that any irregularity of duty would be likely to escape detection, and therefore would the patients be made to suffer. You, sir, must be quite aware, that a military or other hospital for the reception of ordinary diseases must be so totally dissimilar in its character and arrangements to one set apart for the cure of lunacy, that the rules and regulations which apply to the former can have no possible relation to the latter. The cure of the insane, I need not remark to you, is effected more by moral than by medical means. The nature and objects of my appointment to the situation I have the honour to hold must plead my excuse for here justifying, as I do now, the irregular hours hitherto chosen by me for making my visits at Hendelle. 2d. The very serious want of orderly and systematic management on the part of Mr. Dickenson, when taken into consideration with the sure evidences I and the female assistants have lately had of his unprincipled habits and inclinations, has a long time since convinced me of the necessity of making my visits at Hendelle as unexpected by him as possible. With this view I have gone to Hendelle at almost all hours, and by so doing I am satisfied that I have not only exercised a very judicious and desirable restraint on Mr. Dickenson, but contributed, either directly or indirectly, not a little to the comfort and well-being of the patients. Moreover, I take the liberty to add, that I am not infrequently prevented going to Hendelle, because I am unable to find a boat when I seek it."

Mem.—About seven months previously, viz. "*April* 10, 1845," I wrote thus to Dr. St. John: "I beg leave to inform you that very great inconvenience is daily and hourly experienced in the want of a boat" for the use of the hospital. "I am myself put to great personal annoyance on this same account, being from time to time compelled to wait about at the ferry, when no boat is near."

became more and more anxious to effect the removal of the patients. All I could do and say were of no avail—delay succeeded delay—one excuse was offered,

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I leave the impartial reader to judge of this gentleman's official zeal and conscientious discharge of his public duties.

"Sometimes, when a boat is to be had, I find no man at the ferry to take me across. On one occasion of this kind, being anxious to get to the hospital, I attempted to ferry myself over; the boat becoming unmanageable, I was obliged to leave it, and get to the shore as I best could. It has happened that the boisterous state of the weather and the rapid tide have prevented me crossing the river. I have now and then, after waiting for some time in the hot sun by the water-side, been taken over by some chance boat. Such, sir, are my various reasons for not visiting Hendelle at any fixed hour. I hope that you will allow them to be in every way valid. That I was 'required to visit the wards and patients at Hanwell at least twice every day' is most true; but Hanwell was and is a well-organized hospital, the model for the civilized world. What Hendelle is I need not say. At Hanwell I and my medical colleagues had remedial means at hand wherewith we could relieve the delusive grief of the melancholic, assuage the irritation of the maniac, and heighten the hope of the despondent. At Hendelle I am without any such powers; the resources both of art and science cannot be said to have existence there. Unless, then, in cases of bodily illness or accident, I am not of the slightest use to the establishment; if we except the mere supervision of general matters, to which I am, under existing circumstances, no more competent than any ordinary and trustworthy dependent accustomed to the insane. During the past month of October, some of the patients at Hendelle have suffered from cholera and dysentery, &c., and although my visits were not then confined to any one hour, they were of daily occurrence; but at other and ordinary times it cannot be supposed that I can be of more use to the establishment than that above mentioned, and therefore it is that I have not considered it at all necessary to visit Hendelle *daily*. I have *generally* gone four, or five, or six times a week.

"I have already told his Excellency the Governor, that not

then another—objection after objection was raised—the lunatics were continued at the "*Leper Hospital*"—and the new Lunatic Asylum at *Marandahn* re-

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until the new hospital is erected, and its plan of government based on that improved system to which I have for some years been accustomed, can I be of any *real utility* to the insane poor of Ceylon; to organize which is my mission.

"As regards the medical registers, I beg to assure you that I very much regret they did not happen to be at Hendelle when you visited it. As there is no place at Hendelle wherein I can write, I am compelled now and then to bring them to my own residence. You request that in future I do not remove them from Hendelle. I will endeavour to do as you desire me. "I have, &c.

"J. G. Davey, M.D."

The preceding letters were, in the course of business, duly submitted to the Colonial Secretary, whose opinion on their contents is here registered.

"No. 253. "Colonial Secretary's Office, Colombo; 29th December, 1845.

"Sir,—With reference to your letter of the 12th inst. and its inclosures, I am directed to acquaint you, that his Excellency has carefully considered the points advanced by Dr. Davey and yourself, and that he is disposed to agree with Dr. Davey, in thinking that it may be more advantageous to visit an establishment like that at Hendelle at irregular times.

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"I have, &c.

(Signed) "J. E. Tennent.

"The Principal Civil Medical Officer." "True copy. (Signed) "W. Morris.

It should be known, in connexion with the above, that the newspaper press of Colombo renewed its criticisms on the lunatics—their accommodation, treatment, &c.—in 1848, and the 'Observer' again took the lead in the matter; but this time, instead of finding *fault*, it awarded *praise*—on this occasion it *commended*, not *censured*. The tone of the 'Observer' in 1848 was widely dissimilar to what it was in 1843. The mention of my name in connexion with the amelioration of the insane at Colombo stirred up the bile

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mained unappropriated. Fungi and rank grass —here and there springing into existence, and

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of certain members of the *military* and *colonial* medical services, the majority of whom had lived sufficiently long in the island to witness alike the extinction of the neglect and wretchedness which did belong to the old regime, and the creation of a new order of things; and hence was it, a rival editor was induced to open his columns to this *deeply-injured* party. Aspirants for literary honour and distinction, both with and without names—*anonymous* and *nonymous*, and the latter quite *unknown*—rushed to the encounter. The naughty 'Observer,' being challenged by its opponent, the 'Times,' to support assertions by *facts*, did exactly as it was bid. *I* was said to be the author of the 'Observer's' editorials, and on learning this much, I hoped, by denying all knowledge and participation in them, to stop the hubbub the *incogniti* of the 'Times' were making in the plenitude of their discomfiture and defeat. I wrote to this effect to the editor of the last-mentioned paper, and at the same time took the occasion to deny an assertion contained in a published epistle from one "Celsus," viz. *that I did not visit the new Lunatic Hospital daily.* "CELSUS" was no doubt gratified to learn that not only did I visit the hospital *daily*, but that I did so twice and sometimes thrice a day.

A person in charge of the medical stores at Colombo, and holding the rank of a second-class assistant-surgeon, and whom I am *little* disposed to drag from the obscurity he is considered by all persons, with the exception probably of the P. C. M. O., to merit—one "J. M. GRANT," a *gentleman* long accustomed, as I am told by many, including his medical friends, to indulge his "spiteful feelings" (these words are not my own, but were employed as I now use them), in the composition of *anonymous* essays, &c. for the periodical press, incurred the responsibility of vindicating the aforesaid "Celsus," the assertions made by whom he declared "*in every respect* TRUE;" and thereby very *politely* and *generously* falsifying my denial.

"J. M. GRANT," in his *insidious, treacherous letter* (these words are also not my own, but were made use of by a gentleman of a high rank and character, well known in Ceylon and the East, when speaking of the aforesaid production), writes—"*I am not the author of*

bespeaking ever and anon the inexhaustible and ceaseless operation of Nature's laws—revealed not

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'CELSUS.'" I have heard it denied. "*Grant is not to be believed,*" said a medical gentleman in my hearing.

"J. M. Grant," in his "impertinent" address to the editor of the 'Times' (the word "*impertinent*" is also quoted and here employed as I heard it), implies—1st, that I have neglected my duties whilst in Ceylon; and, 2dly, that I have not treated the Principal Civil Medical Officer with due respect—both of which *the reader* must determine for himself.

"J. M. GRANT" refers to the above correspondence between Dr. St. John and myself for confirmation of *his* views!! *I* refer the reader, in defence, *not* only to it, but to the contents of this small volume. The reader is requested to read the following quotations, here placed in parallel columns, and then to decide how much of "*passion,*" "*prejudice,*" and "*misrepresentation*" "J. M. GRANT" has or has *not* displayed—*he disowns all such!!*

Extract from Dr. Grant's letter.

"Dr. Davey's instructions direct him to visit the Lunatic Asylum *at least twice a day;* and such being the case, he gives a very useless defiance, when he challenges '*Celsus*' to prove that he has not '*occasionally*' visited the institution twice, or that he has not gone there three times in a day. This little word '*occasionally,*' which Dr. Davey himself has used, can only tend to strengthen the implied suspicion of 'Celsus,' that he has not performed his duty with zeal."—*Ceylon Times,* July 11, 1845.

The annexed is Dr. Grant's authority.

"Prin. Civil Med. Officer's Office,
"Colombo, 11th Nov. 1845.

"SIR,—I have the honour to state, that on inspecting Hendelle yesterday, I learnt with equal *surprise* and *regret,* that you are not in the habit of visiting that establishment regularly (you are aware that you were required to visit the wards and patients at HANWELL *at least twice every day*); and I now request that your morning visits may henceforward be made at or before seven o'clock a.m."

(Signed) "C. ST. JOHN, M.D.
"P. C. M. O."

"J. M. GRANT" has, with characteristic Scotch prudence, and

only the tenantless state of the various apartments, but also the sure decay which waits on all human endeavour.

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with that "*spirit of fairness*" of which he does but jest, though he would persuade us otherwise, *forgotten* (?) to tell the editor of the *Times* newspaper anything about the *decision* of the Colonial Secretary; how much he and the Governor agreed with *me* and disagreed with *Dr. St. John;* or how preferable *they* considered it for me to visit Hendelle as I had chosen, viz., at "*uncertain times,*" and NOT at seven a.m. He has, "*on the most certain authority,*" failed to say how the said "INSTRUCTIONS" of the said P. C. M. O. were put on one side, *annihilated* by a higher authority (vide Col. Sec.'s letter to P. C. M. O., as per above); and by which act of the late Sir Colin Campbell I was thrown back on my original instructions dated "*December* 28, 1844," which are contained in the following few words, addressed by the Colonial Secretary to the Principal Civil Medical Officer, viz.: "*Doctor Davey having reported himself ready to undertake his duties, I am directed* (*by the Governor*) *to request that you will give instructions for his being placed in* CHARGE *of the establishment at Hendelle. He will also be required* TO GIVE HIS ATTENTION *to the lunatics who may be confined at the Hulfsdorp Jail;*" and which aforesaid "*instructions*" were conveyed to me in the following letter addressed by the P. C. M. O. to myself, dated "31st *December*, 1844 :"

"I have the honour to forward, for your *information* and *guidance*, a copy of a letter from the Colonial Secretary, and to request *you will take charge of the establishment at Hendelle* from the *Superintendent of Vaccination* (Mr. Templeton); you will also be *required to give your attention to the lunatics* who are confined at Hulfsdorp."

If "J. M. Grant" were in the possession of only a fractional part of that "*spiril of fairness*" which he evinces for a *love of detraction and officious interference* of and with other persons, whose views and conduct he has neither the intellect nor the moral sense to discover and appreciate, then would he not have withheld the information here supplied from the editor of the 'Ceylon Times', on whose *sympathy* he relies so much.

In the records of the Medical Officer's office will be found the following:—

Heaven help him! The reader may be disposed to ask, as many in Ceylon did, what is all this to *Dr. Grant?* who is *he*, that he should step out of his way to personate DON QUIXOTE, *and in such a cause?* This famous act of chivalry has for its object, he tells us, *the vindication of the medical department from unjust aspersions.* Can such be removed by the abuse of myself? In what way can I be held responsible for the mention of my name in connexion with an apparent amelioration of the insane in Ceylon? The only course open to Dr. Grant, and one at all likely to counteract the injurious reflections cast on "*the medical department,*" if such has been the case, was to prove—

1st. That the lunatics are or were in 1848 no better cared for and attended to than in 1843-44.

2d. That they are or were in 1848 in the same dirty, wretched, and neglected condition as they were in 1843-44.

3d. That the *cures* among the insane have not progressively increased from 1844 upwards: that they—*the cures*—have not risen from 0 up to nearly 40 per cent. between 1844 and 1848.

4th. That the *mortality* among the insane has not diminished from 33 per cent. to 15 per cent. between the years 1844 and 1848, that is, during my sojourn in Ceylon.

Will Dr. Grant venture to affirm that before I arrived in the colony the insane were as well off as they have been since? or will he, in the face of the many documents contained in this little book, dare refuse me the credit of both originating and carrying through the principal of the various improvements which have taken place? *Neither the one nor the other will he.* Let him put himself in communication with the Medical office and the Colonial Secretary's office, if he be in any doubt. Dr. Grant may be *ambitious*, he may be *avaricious;* but he may rest assured neither *honour* nor *wealth* is within the reach of those who submit themselves to the guidance of the lower feelings, however well concealed they may be.

"*Thou shalt not bear false witness against thy neighbour.*" J. M. Grant, M.D., be you advised in time, and if thou wouldst

"Hendelle; May 31, 1846.

"SIR,—I have the honour to inform you, that within these past few days a considerable portion of the building at Hendelle has fallen down; a fact

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avoid the fate of the crest-fallen and discomfited critic Fadladeen, learn, ere it be too late, to respect *measures* rather than MEN. If it be true, and who *can* doubt what Shakespeare has said, that—

> "Slander lives upon succession,
> For ever housed where it once gets possession;"

pray drive *it* from thy thoughts, give *it* no tongue, but this do thou,—take the advice of a *sage*, of one whose life was devoted to good and holy pursuits, and remember well his words: "Let man perform those actions of which *futurity* will never cause him to repent." (GOTAMO.)

The above observations are addressed, not only to the person here named, but also to Dr. Roe, the *Principal Medical Officer*, for HE it was who both allowed and justified the publication of the letter mentioned. Dr. Roe is "*the most certain authority*," to quote Dr. Grant's words—Fact!!

It should be known there is a "minute" by the Governor of Ceylon, to the effect that no public servant shall on any account engage in "*any irritating correspondence with the view to redress a supposed grievance*," &c. &c.; and therefore was I induced, in self-defence, to report the conduct of Dr. Grant to the Colonial Secretary; in fact, to throw myself on the protection of the Government. The matter was duly referred to the Major-General, as the head of the military department, but *he* decided that there was "*nothing in Dr. Grant's letter which in any way subjects him to the pale of military rule.*" The Major-General very properly expressed his disapproval of the conduct of Assistant-Surgeon Grant; but, if report says true, that gentleman must be unaware of the existence of a specific order from the HORSE GUARDS, which, in the present instance has been culpably disobeyed; however that may be, the decision of the MAJOR-GENERAL is the *cause* of the notice here taken of this matter.

which bespeaks the necessity of a speedy removal of the patients to the hospital now in course of erection at Marandahn."* "I have, &c.

"J. G. DAVEY, M.D."

By this time the building was to have been completed. On "*December* 5, 1846," the "very *bad state*" of Hendelle is again reported (my letter mentions "*the wards occupied by the leper patients*," but a few of the insane also were compelled to occupy them), and repeated on "*January* 14, 1847," and subsequently, as the following letter, addressed by me to the Lieutenant-Governor, Sir J. E. Tennent, will show. This letter was written *at the request* of Sir J. E. Tennent, made to me on the occasion of my waiting on that gentleman, officially, to express my regret at the delay experienced in not removing the insane from Hendelle; begging him, at the same time, to give his consideration to the matter. The reason why the Principal Civil Medical Officer altered his intentions about the lunatics I have not been able to learn; however, on *April* 1, 1847, nearly seven weeks anterior to the date of the succeeding

* In anticipation of the removal of the insane to Marandahn from Hendelle, I removed my residence, *with the Governor's permission*, some weeks previously to this date, *May* 1846, to a more convenient neighbourhood, but as it turned out, to little purpose; in fact, after waiting some time I wrote to the Colonial Secretary, informing him that I must return again to the neighbourhood of Hendelle if the insane were allowed to remain there, and the new Lunatic Hospital continue unoccupied.

communication to the Government, I was required to state to him what assistance, &c., would be needed to convey the patients from Hendelle to Marandahn.

"Colombo; May 14, 1847.

"Sir,—I very much regret I should find it so indispensably necessary, as I do, to solicit your especial interference on the part of the insane poor under my charge, and allow them to be, as quickly as possible, removed from Hendelle to the new building designed for them at Marandahn. Until now, I did hope their removal might have been brought about in the more ordinary course of things, and without any *particular* endeavour on my part to effect so desirable an object. In full hope that my own wishes on the subject would have been anticipated by the very exclusive proceedings adopted by the '*Principal Civil Medical Officer*' or Garrison Physician, I have waited thus long; but feeling as I do, that any further procrastination on my part would be highly blameable, I have resolved, *thus*, to call your attention to the subject."

After patiently waiting in vain the issue of a correspondence which I had learned by pure accident was pending between the P. C. M. O. and the local Government concerning the new Lunatic Hospital, and the removal of the insane thereto from Hendelle, I wrote to that officer the following letter:

"Colombo; March 11, 1847.

"Sir,—I have the honour to inform you, that I yesterday visited the new Lunatic Hospital at Marandahn, and found the building, generally, in such a state of completion, that I think it highly desirable the insane patients, now at Hendelle, should be directly removed thereto. This arrangement, whilst it allowed the vacation of the sheds at Hendelle, now occupied by the lepers, and which you are aware are really falling to the ground, and thereby endangering the lives of those within them, and their removal to the only secure portion of the building at Hendelle, at the present in the occupation of the insane, would moreover contribute very materially to the comfort and well-being of both lunatics and lepers. It would be necessary for the present time to appoint an overseer and a couple of servants to remain at Hendelle with the leper patients.

"In case of the arrangement herein submitted being carried into effect, no kind of repairs could be needed; but if *not* so, such are, indeed, indispensable. I have, &c.

(Signed) "J. G. Davey, M.D.

"To S. C. Roe, Esq., M.D.,
P. C. M. O."

The reply I had the honour to receive was to the effect that the *"subject-matter of my communication was already before the Government."*

The subsequent death of a female lunatic from

injuries inflicted by another patient with a brick pulled from its attachment in the insecure wall of the apartment they and others occupied on the occasion, gave me a highly appropriate opportunity of again urging the removal of the insane to the new establishment.*

Afterwards, at the request of the Principal Civil Medical Officer, I applied for the necessary assistance to remove the lunatics and stores from Hendelle to Wellikadde, when I was informed by letter that "application will be made to Government for the assistance necessary in due time after the necessary

* The annexed letter is that above referred to :

"Hendelle; 18th March, 1847.

"Sir,—I regret to inform you, that '*Garrow,*' alias 'Tokodi,' a female lunatic, very lately admitted into hospital, was this morning, a little after six o'clock, found dead in the room where she and two more female patients had slept. On examination of the body a contused wound was found on the right side of the head, which in all probability was the immediate cause of death, as well as other minor marks of injury about the scalp. The lower maxillary bone was also fractured, and the integuments very much lacerated. The deed was perpetrated by one of the two female patients above mentioned, whose name is Nona Baba. I beg to add, that information of the occurrence was directly given to the headman of the village.

"The present is an additional reason why the insane should be directly removed from Hendelle. The apartments in the occupation of the patients are, generally, in so ruinous a state, that it is quite impossible to provide for their safety. In the present instance a brick was detached from the wall of the room, with which the fatal injuries were inflicted on the deceased. The unsafe condition of the building has been frequently reported and mentioned by me, as my letter, dated May 31, 1846, will prove; and with

additions and *improvements* which have been suggested for their accommodation may be completed;" and to which I replied thus,—"I am quite unaware of the '*additions*' and '*improvements*' suggested, and equally so of their *origin*, and regret too the continuance of the insane at Hendelle, where, as I believe, whatever remains to be done, could be advantageously deferred until after their removal to Wellikadde."

Such is the correspondence which has transpired between myself and the Garrison Physician, or "Principal Civil Medical Officer."

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reference to the same matter, viz. the safety and protection of the patients, I have long since requested an increase in the number of the servants. "I have, &c.

(Signed) "J. G. DAVEY, M.D.,

"Medical Supt. of Lunatic and Leper Hospital."

Mem.—The reader will be pleased to bear in mind, that precisely one twelvemonth anterior to the date of this letter, it was anticipated the insane would have occupied the new hospital at Marandahn; but their extraordinary detention at Hendelle, pending the completion of this building, had the effect of keeping me nearly seven miles from my patients, exclusively of the intervening river, the Kalani Ganga; so that I was prevented giving that attention I wished to my duties, and was moreover compelled to meet my travelling expenses to and fro. Had it been ever *intended* to limit the utility of my professional services, and to throw difficulties in my path, and at the same time, by retarding the amelioration of the lunatics at Colombo, to bring discredit both on myself and my appointment, no better scheme could have been devised, than that one which delayed the occupation of the new asylum. Strange to say, it was not until I wrote to the Government, and threatened to go back again to the neighbourhood of Hendelle, that the patients were removed to Marandahn. I occupied the nearest available residence to it.

"It has, Sir, come to my knowledge accidentally, that the reasons assigned by Dr. Roe to the Government, for keeping the patients at Hendelle, are these:—1st. The want of privy accommodation. 2d. The absence of a surgery. 3d. The necessity of a store-room. 4th. The want of an airing- or exercise-ground. I have the honour to submit to you, for the consideration of his Excellency the Lieut.-Governor, the subjoined objections to the reasoning of the Principal Civil Medical Officer:

"Objection 1.—There are at the new establishment at Marandahn as many as four excellent privies, two for the males and two for the females, all of excellent construction, and well adapted for the purposes of cleanliness; and, according to the Civil Engineer, perfect in their arrangements: at Hendelle there are *two*, but both in the *male* apartments; and one of them in so dangerous a condition, literally falling in, that I have requested the Medical Sub-Assistant at Hendelle (Mr. Ebert), not to allow it to be used.

"Objection 2.—In the original plan of the establishment at Marandahn the surgery is appended, or rather belongs to the godowns attached to the residence of the *Superintendent*—an excellent provision, and desirable for very many reasons; and until such *residence* and its offices are erected, the small almirah containing the few drugs allowed for the use of the insane may very properly stand in an apartment of the Medical Sub-Assistant (as it

does now at Hendelle), or in the *temporary* store-room.*

"Objection 3.—As regards the *"store-room,"* it was, or rather is, my intention to occupy a *ward* on that side of the building now in course of erection as the *store-room,* until such time as *that* originally designed for such purpose is completed. It should be known, that although the establishment at Marandahn is far from complete, yet the accommodation there is in every way a hundredfold greater than at Hendelle, whereat the *"store-room"* is little better than a ruin, and of course quite unsafe as a receptacle of any kind of property.

* Some time after the above letter was written, and after the occupation of the new Lunatic Asylum by the patients, and on learning that the government had abandoned all idea of building a residence for the Medical Superintendent thereat, I reported officially that a room set apart as a *surgery* was much wanted. A few days after my letter was received, I met *Dr. Roe* at the Lunatic Asylum; when he, in the most discourteous and offensive manner, insisted on it, I had declared that no *surgery* was or could be required; and in evidence of the assertion, referred to the passage in the aforesaid letter, marked "Objection 2." In vain did I firmly yet respectfully beg him to reconsider the matter. There were witnesses present. The well-feigned courtesy, the studied obsequiousness of this *Sir Pertinax Macsycophant* (whose *urbanity* (?) and *politeness* (?) are the theme of admiration in more circles than one!!), did not at this time avail him; and in a moment of ill luck *truth* insisted on its deserts. *The medical despot of Ceylon* stood unveiled before us. I could think only of the deformities of *Khorassan's prophet,* and of the immortal *Pecksniff.* It is high time this gentleman's official insolence and rare partialities were exposed.

"Objection 4.—Of the *four* quadrangles presented in the original plan, and which were intended to constitute the entire Lunatic Establishment, exclusively of the various offices, &c. belonging thereto, the *two* front ones only have been proceeded with; and they each inclose a court-yard, which being divided through the centre, there remains attached to either one of the two principal divisions for the accommodation of the lunatics, both on the male and female sides, a good-sized court-yard; so that, in the *fourth part* of the whole building, as it at present stands, or what is the same thing, in the *one* quadrangle now completed, there are two airing-courts or gravelled inclosures, which of themselves allow of '*air*' and '*exercise*,' and at the same time provide *security* for the patients. Such is what there is not at Hendelle; for it is impossible *there* for the bulk of the inmates to be restricted in their walks, seeing that they are bounded only by the jungle. To detain the patients at Hendelle until the fourteen acres of ground at Wellikadde are not only securely inclosed, but duly planted and laid out as pleasure-grounds and productive gardens, in fact, pleasantly and profitably disposed of, I respectfully submit would be to commit an act of injustice so truly palpable, that excuse would be impossible. The patients could scarcely be considered more unsafe and insecure about the premises at *Marandahn* than they are at *Hendelle*. In short, the *three* wards now finished at

the new establishment will afford that accommodation, convenience, and comfort to all the insane patients now in confinement, which can nowhere be found on the whole of the premises at Hendelle. I trust the above observations may be found, to your judgment, to answer, and satisfactorily too, the reasons given by the *'Principal Civil Medical Officer,'* or Garrison Physician, for the longer detention of the insane at Hendelle.

"But, Sir, I cannot rest here. You will, I hope, excuse me, if I take this opportunity to remark on certain objections and criticisms which have reached my ears in connexion with the *'site'* and *'construction'* of the new Hospital for the Insane. Had the opinions expressed not originated in members of my own profession connected with the Government, or had they come to my knowledge with a fair, straightforward, and manly bearing, and yet more, had they not led to the unjustifiable detention of the insane at Hendelle, then should I have declined to notice them; but, under the present circumstances of the case, I feel called on thus to observe,—

"1st. *The site of the New Lunatic Establishment.*—It is objected, and not without some show of reason, that the building is not erected on the higher ground to the back of the Cotta road—various reasons are, I believe, given; but the principal one,—viz. the moist, even swampy, nature of the soil which the Asylum occupies,—happens, curiously enough for the

objectors, to have no other existence than in their distempered fancy. The whole of the ground specified has the advantage of a gentle slope towards the canal which bounds the establishment on the north. Mr. Norris (the Civil Engineer) assures me that the difference in height of the *road*, which constitutes the upper or southern boundary, and the surface of that one which is contiguous to and runs parallel with the canal just mentioned, amounts to several feet—so that it is quite impossible for the intervening ground appropriated to the building to be otherwise than well drained. I have, of course, visited the *site* in all weathers; and however much rain may have fallen, I have never seen reason to believe the ground *swampy;* that it is much broken up, and therefore presents patches of moisture is most true, but it certainly has all the advantages belonging to land easily and well drained. Even if the place were, as it is by some few declared to be, *swampy, I* am not the person to blame,—*I* happened *not* to recommend *this* site. If you will take the trouble to refer to a letter of mine addressed to the *Acting* Colonial Secretary, P. E. Wodehouse, Esq., bearing date 'May 27, 1845,' written at the desire of Sir Colin Campbell, and designed to explain my views and expectations in reference to the insane poor, and the erection of a Lunatic Asylum, &c. &c., you will find these words: 'As regards the *site* of the proposed hospital for the insane, it is my opinion that it should be within two

miles of the Fort, and on *an elevated portion of ground* commanding *a wide and various prospect;*' and in another part of the same letter occurs the following passage:—'The grand object to be kept in view in the construction of any kind of hospital is the cure of its inmates, and with this view it is necessary to leave undone nothing that can in any way contribute to the health and comfort of the patients: such can be promoted and secured only in a commodious and well-ventilated building on an eligible SITE, *one commanding the facilities of a complete and efficient drainage,*' &c. &c. In a letter which I addressed to the late Principal Civil Medical Officer, Dr. St. John, concerning the ineligibility of Hendelle for the new Asylum, dated '*January* 20*th*, 1845,' I have written this sentence: 'After having studiously and deliberately thought the matter over, I am completely induced to believe that the proper *site* of the Lunatic and Leper Hospital proposed to be erected, is in the Cinnamon Gardens *near to the Jail,* and not at Hendelle;' meaning by this the identical patch of high ground directly opposite the Jail, and running in an irregular manner towards the property of Mr. Lock, and visited by me in company with the Civil Engineer and the Superintendent of the Jail, with the view of selecting the site of the new Lunatic Hospital. The late Governor, Sir Colin Campbell, it is who is responsible for the

present site. The Superintendent of Vaccination having conveyed to me in March or April 1845, the wish of the late Governor that I should wait on him, I did so; the object of that interview being to learn my views concerning the object of my mission to Ceylon, I took occasion to speak at length of the comparative merits of Hendelle and Marandahn as sites for the contemplated Lunatic Hospital. Sir Colin Campbell much disagreed with my opinions, and supported himself with the authorities of Drs. St. John and Templeton; he, moreover, emphatically, declared the new hospital should never be built on the high ground to the back of the Cotta road; declaring, that it would be never possible to get a supply of water there; and in support of this assertion made especial and strong reference to the Jail, where *water* could, then, with the greatest difficulty and inconvenience, be obtained. To meet this, certainly strong objection, I suggested the construction of an Artesian well: his Excellency thought such an undertaking premature. Sir Colin Campbell and myself had a second conversation on the matter, and to the same effect. Mr. Norris and I had frequent conversations about this time respecting the said site, and he will bear me out so far as to testify to my anxiety to have the new Asylum erected on the higher land.

"Having then, Sir, satisfied you that *the present*

site is not that one to which I gave the preference, you will allow me to add, presuming on its '*complete and efficient drainage,*' the practicability of which Mr. Norris has always considered CERTAIN, that I am quite unaware of the ground of objection taken by the garrison medical officers; for with their known views concerning the native insane, and their demands on European science and humanity, they are not very likely to attribute much importance to the moral influences which may have been expected to be exercised on the diseased mind by the beautiful inland scenery of this country, had the Asylum been built on the eminence.

"Speaking comparatively, I still think the high land contiguous to the Jail to be preferred; but nevertheless I will never deny the fact, that the site fixed on is a very good one, and as a *level situation,* of which the best authorities speak favorably, it possesses its advantages. Dr. Jacobi, in his work, '*On Hospitals for the Insane,*' at page 27, when contrasting the advantages of a high and level situation, says, 'It,' the latter, 'enjoys very important advantages not possessed by the former. The principal of these is the abundant supply of water, which a full stream affords for the baths, washing, and every kind of cleaning, as well as for the appropriate construction of the privies. Other advantages of a level situation consist in the

greater facility of enlarging the ground floor of the buildings to any required extent, in the greater protection from the influence of the winds and storms.' The applicability of the above remarks to the new lunatic building are singularly felicitous. So much then for the SITE. I will now proceed to consider another stronghold of opposition, viz.:

"2d. *The Construction of the Building.* This, to my utter astonishment, is declared to be unfit for the purposes intended, and ill-arranged for the accommodation of lunatics; I emphatically deny the assertion, and pronounce it erroneous. I will not trouble you with a lengthened essay on the subject at issue, yet, Sir, in support of my own views as practically demonstrated in the construction of the new Lunatic Establishment, I would especially recommend the P. C. M. O., and all those who agree with him, to peruse—1st, the evidence of Dr. John Conolly before a committee of the House of Lords; 2d, the Report of the Metropolitan Commissioners of Lunacy, for 1844; 3d, the work of Dr. Jacobi above quoted. In the last we read that that form of asylum is 'SUPERIOR TO EVERY OTHER' which is composed of 'SEVERAL DISTINCT *quadrangles, having a certain connexion and relation to each other, and each inclosing a* court-yard.' (p. 30.) And what is the building at Marandahn else than such?

"I may add, Dr. Jacobi is one of the very first European authorities on this subject.

"It is not unlikely that the opinions of those gentlemen who dissent from me may have been derived from the Military Lunatic Hospital at Fort Clarence, near Chatham. It is sufficient for me to observe, on the authority of the *Metropolitan Commissioners in Lunacy*, the above-named institution is 'a very miserable place, and *ill-suited for a receptacle for insane persons.*' (See Report, p. 31.)

"I may perhaps be allowed here to express my astonishment that, although sent to this colony expressly to reorganize and ameliorate the condition of the insane, and to superintend the construction of a suitable building for their reception, and form rules and regulations for its general management and control, subject of course to the approval of the local Government of Ceylon, yet am I NOW without so much as a *voice* in whatever arrangements may be and are made and contemplated, having reference to the object of my appointment; that not only am I never even consulted concerning any matters relating to the insane poor, their direction, management, or control; but what is more, I am kept in profound ignorance of all correspondence which may transpire on the subject,—facts which are demonstrated in the correspondence between myself and Dr. Roe, contained in this very communication;

and additional evidences to the same effect are not wanting.

"I regret exceedingly that in the exercise of what I am bound to consider the duties I owe to the Government I have the honour to serve, that I should feel required to call in any question the propriety or judgment of another person; in the present instance, I hope and trust that you, Sir, and his Excellency, the Lieutenant-Governor, will attribute this, my conduct, to its only and true source, viz. a desire to discharge the duties of my office *reasonably* and conscientiously.

"To conclude—in an official letter of mine, addressed to Dr. St. John, late P. C. M. O., dated *March* 1845, occurs the following passage: '*The present insecurity of Hendelle and very miserable state of the patients, plead eloquently for the immediate commencement of the new Asylum; if it be possible, nothing should stand in the way of this—the principal and really the only object.*' The same causes *now* '*plead eloquently*' in favour of the removal of the insane to Wellicadde. The annexed quotation constitutes the concluding sentence of a long communication to yourself, dated December 1845, intended as descriptive of the plan of the new Lunatic Hospital, at that time in progress, and containing also *observations on its management and direction.* 'Hoping that the speedy erection of the new hospital will put me in a position to render services equivalent to my salary, and at the same

time enable me to be of some real benefit to my fellow-creatures. I have,' &c.

"I plead now, and for the same reasons, the immediate removal of the insane to the new building intended for their reception.

"It remains for me to add, that should it be found inexpedient to remove the patients from Hendelle, the responsibility, whatever there may be, rests not with myself; and in that case, doubtless the sheds &c. at Hendelle need to be *repaired*, else some serious accident might probably happen to the patients, as I have mentioned in my letter to Dr. Roe, of March last, and which is contained in this communication. I have, &c.,

(Signed) "J. G. DAVEY."

The lunatic patients were AT LENGTH liberated from Hendelle, and were received at the new hospital. This desirable event occurred on SEPTEMBER 4, 1847, that is, two years and nine months after my arrival in the colony, and SEVEN YEARS from the period at which the attention of the Government of Ceylon was first directed to their dreadfully miserable and neglected condition; that is, according to the authority of, I think, Mr. GIBSON, C.C.S., as given in the published Report of the proceedings of the Legislative Council for 1843.*

* The removal of the insane, I have good reason to believe, was, *after all*, the consequence of a demi-official correspondence which transpired between myself and Sir J. E. Tennent, in the JULY (1847)

In the title-page of this volume I have prepared my readers for the PAST and PRESENT state of the insane in Ceylon. As for the PAST, I would wish it to be understood to be limited by SEPTEMBER 1847, when the new Lunatic Hospital was at length tenanted; from which time the PRESENT may be, I think, correctly dated. The PAST then embraces the incarceration of the *insane* at the Leper Hospital at Hendelle, and the PRESENT their occupation of the new hospital at Marandahn, whereat they are certainly very much better off than they ever were before, and much better cared for and attended to than was ever the lot of the insane in Ceylon. The ruin and wretchedness which everywhere surrounded them at Hendelle, are here exchanged for large and commodious apartments, both cleanly and well ventilated.

It is to be hoped that, with the vacation of the old Leper Establishment at Hendelle, the chains and

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* succeeding, else the P. C. M. O., in his exclusive attachment to the interests of the military, or in his vain-glorious attempts to play the "*head of the department*," would *doubtless* have retained the NEW LUNATIC HOSPITAL as a health-station for the garrison at Colombo. Its occupation by the sick of the 95th (?) regiment was purchased at the cost of the insane then at Hendelle; however, a protracted colonial residence has oftentimes a sad depressing effect on both the intellect and higher sentiments of man, and therefore must the stream of humanity be expected to be often and abruptly checked in our colonies ere it can reach its destined goal. Pity and forgiveness be to them who forge such hinderances; may *they* never require the sympathies and care they are instrumental in withholding from the helpless and destitute!

manacles, *once* in so grcat request therc, may be for ever forgotten,—consigned to that oblivion whieh waits on whatever does or did bclong to the lowcr nature of man; for *charity* directed by *reason* can take no eognizance of that kind of treatment whieh involves only a brute eompulsion, a mere animal force, to the exclusion of that moral surveillance and eontrol in the exereise of which both the physieian and the patient are at onee raised above the low propcnsities of our nature, which would make us of the earth, earthy, and are possibly so taught even to anticipatc that period when wc shall no longer be requircd to be reminded of this sanctifying precept, *"Do unto all men as you would they should do unto you."* May the mistaken advocates of restraint in the treatment of lunaey think how impossible it would be to control their temporary mental infirmities by the employment of means whieh excepted those of kindness, encouragement, and personal eare and attention!

The sueeceding Annual Reports or Contributions to Mental Pathology, made to the Government of Ceylon, will be found to complete the HISTORY of the *origin* and *progress* of the amelioration of thc insane in the far-famed *Topramene* alias *Ceylon.* They were written in aeeordance with a request of the Prineipal Civil Mcdical Offieer; and I would take this opportunity to express to Dr. Roc my thanks for the opportunity so afforded me to register my

experience in Ceylon. As that gentleman wished me, I have neglected nothing "NECESSARY TO ELUCIDATE THE MYSTERIOUS MALADIES OF THE MIND, AND TO IMPROVE BY EXPERIENCE THE MEANS USED FOR THE RESTRAINT" of the lunatic.

In the composition of the "*Reports*" I happened accidentally to write in the *plural* number, I have herein preserved the "*we*," though for no good reason.

REPORTS.

The First Report of James George Davey, M.D., *Medical Superintendent of the Government Lunatic Hospital, Ceylon. Presented January* 1847.

In order to render this, our first Report, the more complete, as well as to give a something like a character to our proceedings, and not less to preserve some reeord of the course pursucd towards the amelioration of the insane in Ceylon, we beg leave to present the following prefatory and brief observations.

The judieious seleetion of the site of a building, of whatever kind, being of first and paramount importancc, we were indueed on our arrival in the colony to set about the investigation of this question as it eoncerned the new Lunatie Hospital, now in course of ereetion, and after maturely balancing the merits and demerits of Hendellc, whereat the new and improved establishment was then intcndcd to oceupy the same locality as thc old Dutch Lcper Asylum, we took upon oursclves thc responsibility

of urgently recommending the Local Government, for the reasons then explained, to abandon it, and to allow the new Lunatic Hospital, then only proposed to be erected, to be built at *Marandahn.* It is with much satisfaction that we allude to the Governor's sanction of this locality, and although the higher ground to the back of the Cotta road may have presented some *more* favorable features as a site for a Lunatic Hospital, as was suggested ere the new building was commenced, yet are there innumerable reasons to feel satisfied with the result of our endeavours, and gratified by the kind support they have received from the Local Government. Another measure which we deemed* of much moment, was the removal from the establishment at Hendelle of all those patients who were neither lunatic nor leper; and contemporaneously the admission from the jail at Colombo of all the insane there confined. This arrangement not only enabled us to become better and more personally acquainted with those under

* Since the above was written nearly two years have elapsed, and the experience thus acquired proves how much more desirable is the lower than the higher locality. At the Jail, which is situated on "*on the higher ground to the back of the Cotta road,*" the amount of *sickness* among the prisoners has greatly exceeded that at the Lunatic Asylum. Since the occupation of the latter building by the insane, the per centage of *sick* has varied from two to six per cent.; whereas at the Jail it has seldom been below *ten* per cent., and has reached as high as *seventeen* or *eighteen* per cent. For additional particulars on this head, the reader is referred to the *third* and concluding Report herein published.

our especial charge, but got rid, to a very great extent, of that objectionable and even distressing admixture of sick, insane, and leprous, which had so long been permitted to exist. This separation of the patients at Hendelle took place in 1845, and the immediate effect was in the highest degree satisfactory; it contributed to a great extent to the comfort and improvement of not only those lunatics previously at the hospital at Hendelle, but of those also who were received from the Colombo jail.

In the correspondence which has already taken place between ourselves and the Colonial Secretary, by the desire of his Excellency the Governor, we have treated at some length of those general principles of management and care which obtain in all well-regulated lunatic hospitals in Europe; we have explained in what the resources of the humane treatment of the insane consist; we have dwelt on the moral means of cure in use at Hanwell and elsewhere; and we have alluded to the increased and improved facilities of treatment which the new hospital at Marandahn will afford us; and to these several important questions we shall recur in this Report as the opportunity offers. In the plan of the new hospital, which I had the honour to submit to the Honorable Colonial Secretary, for the approval of his Excellency the Governor, and which said plan has been, in all important points, adopted, we have been, with the assistance of the Surveyor-General,

at some pains to unite the economical arrangements required with those general principles in the construction of the building, &c., necessary to the carrying out of that improved system of treatment so indispensable to the amelioration of the insane in this colony and elsewhere. Moreover, the entire plan and the various artistical features of the building are such as to allow easily any kind of addition to meet the more advanced views of another and a future day. The speedy removal of the insane from Hendelle to Marandahn, the near completion of the hospital encourages us to anticipate with very much pleasure.

On the 1st of January, 1846, the Lunatic Hospital contained 44 patients, of whom 30 were males and 14 females. In the annexed table is seen the various forms of mental disease from which these 44 patients suffered, together with their numerical proportions:

	M.	F.	TOTAL
Mania	5	1	6
Mania and epilepsy	1	1	2
Suicidal mania	1	0	1
Chronic mania	14	9	23
Recurrent mania	3	2	5
Melancholia	1	0	1
Monomania	1	0	1
Imbecility	4	0	4
Congenital idiotcy	0	1	1
Total	30	14	44

There have been admitted since, that is, during the year 1846, 33 cases, of which there were :—

	M.	F.	TOTAL
Mania . .	17	3	20
Chronic mania .	3	4	7
Melancholia .	3	0	3
Imbecility .	3	0	3
Total .	26	7	33

The addition to the 44 cases remaining in January 1846, of those afterwards admitted in the current year (viz. 33), makes the total number of insane treated (in 1846) to amount to 77, as is here shown :

	M.	F.	TOTAL
In the hospital on the 1st January, 1846	30	14	44
Admitted since .	26	7	33
Total .	56	21	77

If from these we deduct the

	M.	F.	TOTAL	M.	F.	TOTAL
Discharged	12	0	12			
And dead .	7	1	8	19	1	20

It will be seen that there are

Remaining in hospital the 1st of January, 1847 . .	37	20	57

Of the 20 cases here reported as "discharged and dead," there were—

	M.	F.	TOTAL
Mania . .	8	0	8
Chronic mania . .	6	2	8
Recurrent mania .	1	0	1
Melancholia . .	1	0	1
Imbecility . .	2	0	2
Total .	18	2	20

It should be known, in connexion with the foregoing *discharges*, that of the 12 recorded, 8 patients made their escape, so that 4 cases only have been *bona fide* discharged "CURED." However discouraging such a state of things may and does *appear*, yet are we not without a fair and encouraging explanation of the above fact. It is, alas! too true, that so soon as an insane patient becomes convalescent, and therefore in sufficient possession of his natural mental powers to perceive the facilities which the institution at Hendelle affords him, to make good his escape; he not unfrequently anticipates the formal discharge which is awaiting him by leaving at his own discretion. The removal of the patients to Marandahn will, we hope, prevent the occurrence of acts of this nature. I must confess, also, that on first taking charge of the institution at Hendelle, and of the lunatics confined in the jail at Hulfsdorp, ere they were removed to the Leper and Lunatic Asylum, we were but little disposed to hope for even that success which has attended our exertions. When Dr. Millingen took charge of the Lunatic Hospital at Hanwell in 1839, he reports that out of 593 cases, he estimated that 13 only were really curable. It was our good fortune to receive some more recent cases of insanity in 1845 than in the past year, 1846, and therefore is it that the return of discharges for that year presents so much more favorable a character; moreover, we have commenced

the present year (1847) under very encouraging circumstances, four patients having already been discharged "*cured.*" We are not without hope, that so soon as the native population of Ceylon become assured of the increased and increasing care and attention towards the unhappy lunatic of this country on the part of the British Government, the recent cases of mental disease will then fall into our own hands, rather than be allowed to continue subject to the "spells" of the native practitioner. At the present time the dark population entertain very strong prejudices against the removal of their friends and relations from home, when attacked with insanity; but the erection of the new Lunatic Hospital at Marandahn, and not less the separation of the lepers from the insane, concerning which former much superstitious dread is entertained, will go far towards their suppression.*

Subjoined is a record of deaths above given, from

* The separate accommodation of the lunatics and lepers I recommended to the attention of the Government a long time previously, in a letter addressed to the Hon. Colonial Secretary, dated December 1845; the subject is mentioned also in a report of mine sent to the Principal Civil Medical Officer, concerning the *leper patients* at Hendelle.

The "*annoyances*" and "*discomfort,*" arising from their being under one roof, were unceasing; and as an instance of the vacillating intentions of the directing head of medical affairs in Ceylon, it was once arranged to put the leper patients at Marandahn, and to leave the insane at Hendelle; and but for my earnest endeavours, I have reason to believe such would have been carried into effect.

January 1st, 1846, to 31st December of the same year—eight deaths.

DISEASE—CAUSE OF DEATH.	M.	F.	TOTAL
General debility .	4	1	5
Dysentery . .	1	0	1
Suicide from hanging	1	0	1
Pneumo-thorax .	1	0	1
Total .	7	1	8

From the foregoing statement of facts, as they concern the admissions, discharges, and deaths in the past year, 1846, considered in relation to the number of patients remaining in hospital in January of the said year, it follows, as above stated, that there remain now (January 1st, 1847) under treatment 57 patients, among whom there are—

	M.	F.	TOTAL
Mania . .	15	3	18
Suicidal mania .	1	0	1
Chronic mania .	12	10	22
Recurrent mania .	2	2	4
Melancholia .	3	0	3
Monomania .	1	0	1
Epilepsy .	1	1	2
Imbecility . .	5	0	5
Congenital idiotcy	0	1	1
Total .	40	17	57

In this report it is seen that we have employed the words "mania," "melancholia," "monomania," &c. &c.; we have done so, not because we consider their use in the least degree calculated to elucidate

the various abnormal phenomena of the mind, but for this reason, the want of a correct and classical nomenclature of mental diseases. In no department of pathology do we stand in greater need of sound physiological views to direct us than in that one which treats of cerebral diseases. No person, unless he be a phrenologist, that is, unless he is well acquainted with the functions of the brain in a state of health, can possibly be a good judge of the indications of an unsound mind. To every phrenologist at all accustomed to the insane, the use of such terms as the above must be held to be little else than prejudicial to the advance of science. The location of the various primitive faculties, sentiments, and propensities, by Gall and Spurzheim, and their dependence for a healthy manifestation or otherwise upon distinct portions of cerebral matter, convince us how sadly deficient must our notions of insanity be when unaided by the facts of this new science (phrenology), or left without the brilliant discoveries of these great men. Without dwelling on the importance of a knowledge of phrenology, in so far as the elucidation of mental phenomena are concerned, both those belonging to health and disease, we may here observe, that to it we are indebted for the correct elucidation of the subjoined important fact in the medical jurisprudence of insanity, viz. that *lunacy* may, and does generally, exist without any impairment of the intellectual faculties; and that

therefore the bare idea even of measuring the responsibility of an individual reputed of unsound mind by his understanding, or, in other words, by his capacity to distinguish between right and wrong, is, both philosophically and morally, incorrect. If disease of the brain, like that of the lungs or stomach, or of any other portion of the animal organism, may be, and is more frequently than otherwise, partial, that is, confined to a portion only of the viscus affected, it must follow that the phenomena indicating it must preserve an identity of character, and hence is it, if, for example, the organ of "*self-esteem*" were to take on an abnormal action, its functions would necessarily become impaired in some way. If that portion of the cerebral mass were affected with an exaltation of power, whether dependent on inflammation or not, the fact would become manifest in the increased pride and lofty bearing of the individual so attacked, and conversely; and similarly of the other parts or "organs" (to write phrenologically) of the brain; of "*acquisitiveness*," "*destructiveness*," "*veneration*," "*benevolence*," &c. &c. The existence of *moral insanity*, then, as first described, we believe, by Dr. Prichard, is not only confirmed by the light of phrenology, but what is more, becomes with its aid really a matter of demonstration.

In accordance with the above views, it is seen that by far the majority of cases of insanity are more or less *partial;* and if so, how cruel does that

act of the legislature appear which allows the vengeance of the criminal law to fall on all such. "The *law* does not hold that man irresponsible who labours under *partial insanity*," said Sir William Follett; and because, we suppose, one Lord Hale had previously declared that "any person reputed partially insane, inasmuch as his *reason* will be equivalent to a child fourteen years of age, must be held amenable to the laws of his country."

The general belief in the absence of all consciousness and feeling on the part of the lunatic it has been, which has, to a great extent, excused the cruelty and neglect to which he has so long and so generally been exposed. The lunatic is generally neither ignorant nor insusceptible of kindness. If he were either the one or the other, how comes it, we may here ask, that the modern hospital for the insane in Europe presents the scene of industry and good discipline that it does? How is it that the humane or moral system of management and cure has become so popular? If the lunatic were dispossessed of his intellectual powers, how could he prove so expert in handicraft, and so ready, as he commonly does, in the acquirement of useful knowledge and trades? And were he deprived of *all* his moral relations and dependencies, how and whence shall the physician or attendant expect the wholesome mental restraint he so successfully employs for his relief and cure?

To some the above observations may appear

enigmatical; we would remind such, that the various and dissimilar mental faculties, whatever their nature, intellectual, moral or affective, or animal, belong to distinct portions of the brain; and that one, two, or more of such, may be diseased without in any way involving others. We are free to confess that a *superficial* acquaintance with the many indications of insanity is well calculated to lead to a dissimilar opinion to the one here expressed; however, we cannot doubt, to use our own words elsewhere expressed, that "the speech and actions of the lunatic must be regarded only in the light of *symptoms* of the abnormal condition of the affections and propensities; which, under circumstances of *health* as well as *disease*, impart the *character* to man." "In the same manner that the sense of sight becomes, as it sometimes does, the tool of the imagination, and under its influence gives 'to airy nothing a local habitation and a name,' so do the intellectual powers, under circumstances of derangement of the affections, the moral feelings, and propensities, become, as it were, their agent or instrument, whose duty it is to proclaim aloud the nature of the otherwise concealed and awful malady."

The existence of *delusions* among the insane may be thought to negative our opinion, but it does no such thing. In a paper read before the annual meeting of the Phrenological Association in 1843, we have maintained that these said *delusions* of the

lunatic are always in harmony with the predominant feeling; and do but enable the patient the more clearly to express his seductive and abnormal state of mind. In such cases, as Lord Erskine has observed, "*Reason* is not driven from her seat, but *distraction* sits down upon it along with her, and holds her trembling upon it, and frightens her from her propriety." I may add, the *delusions* of the insane are never believed by them, they are but the morbid colouring to intense and deranged feelings; a delusion is but a voluntary and tangible ideal of an innate involuntary and morbid impression. We have been induced to offer these observations in the hope that they may eventually lead to the recognition of other views than those now too generally entertained regarding the real nature of insanity and the criminality of the lunatic, as well as his responsibility to the law, as it is commonly recognised in Great Britain and her dependencies.*

* The above argument and facts derive illustration from the description given by Mr. Dickens of Walter's hasty and anxious pursuit of the good and eccentric Captain Cuttle, "Uncle Sol's kind friend." The reader of 'Dombey and Son' is told, that as Walter sped along, intent only on the distress and anxiety of his kind relative, "everything seemed altered as he ran along the street. There was the usual entanglement and noise of carts, drays, omnibuses, waggons, and foot-passengers; but the misfortune that had fallen on the wooden midshipman made all strange and new. Houses and shops were different from what they used to be, and bore Mr. Brogley's warrant on their fronts in large characters. The broker seemed to have got hold of the very churches,

General Observations on Treatment.—But few patients are admitted into a lunatic hospital who do not present various indications of ill health, independently of those appertaining to the brain; and therefore does it follow that no exclusive kind of treatment, medical or general, can be ever expected to succeed. In the management of no disease, is it more indispensable for the medical man to possess sound and judicious views of his profession than in insanity: in addition to a correct and enlarged acquaintance with medical philosophy as it is at present taught in the schools, he should enjoy a full and complete knowledge of the mind and its various characteristics. No one can be expected to succeed in the treatment of mental diseases who fails to regard the brain as the organ of the mind; or who, neglectful of the sympathetic phenomena, so manifest throughout the whole animal organism, mistakes functional derangement of the brain, dependent on abdominal or uterine disorder, for idiopathic disease.

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for their spires soared into the sky with an unwonted air. Even the sky itself was changed, and had an execution in it plainly." Now had Walter's temporary grief or mental despondency become permanent, his intellectual existence would have been yet more evidently entangled in his abnormal affections, and delusions in harmony with their peculiar nature would have manifested themselves. How differently do the same objects appear to the hopeful and despondent! Truth and reason have seldom the ascendency; but prejudice—that deformed offspring of the too pregnant feelings—*ever*.

Among the insane it is generally found that the excretions present an abnormal appearance; the bowels are commonly costive, though sometimes the gastric disorder is manifested by an increased secretion from the mucous surface of the alimentary canal. It but seldom happens that the lunatic does not present some signs of the dyspeptic, the tongue is rarely normal in its appearance, and the appetite is either deficient or variable. The close connexion and mutual dependence of the stomach and brain render it indispensable that, in such cases, our treatment should be directed to the abdomen as well as to the cerebrum. Dover's powder, mercurial alteratives, and mild aperients, when given discriminately, are then found of much use.

Debility is a common accompaniment of insanity. In cases where the skin is cold, the features shrunken, the body emaciated, and the pulse feeble, however irritable, excited, and sleepless the patient may be, tonics with wine and a generous diet will be found the only remedies.

The time we hope has gone by for the indiscriminate practice of *bleeding* and *purging*, which so disgraced the healing art, in so far as the treatment of insanity is concerned. The local abstraction of blood is frequently desirable, and is among the most invaluable of remedial means. Cerebral or meningeal inflammation is occasionally an accompaniment or a sequence of mental disorder; but nothing can be

more truly absurd than the idea of supposing insanity to be invariably an effect of inflammatory action, involving the brain or its membranes: as well may we attribute anger or fear, or any other violent and temporary mental excitement or feeling, to such a cause.* To bleed the effeminate Cingalese would be but to aggravate his symptoms, and render his lunacy the more confirmed; the application of a few leeches to the head are now and then serviceable, and tend to the removal of pain and excitement; as such, however, among the insane are not *necessarily* the attendant on an increased vascular action, they are commonly more readily and effectually relieved by sedatives, such as camphor with henbane or morphia, than by anything else.

It is much to be regretted that the insane under our charge have hitherto been without the advantages attending the use of the warm and shower baths: with their removal to the new hospital will, we trust, cease such a source of regret.

As regards the strictly medical treatment of the insane, we may here merely observe, that those general principles of science, physiological and pathological, must invariably direct the practitioner, which he is in the habit of recognising when engaged in the management of all other diseases, and of every kind of injury.†

The science of hygiene is an important aid to

* See Zoist, vol. i, 'Pathology of Insanity,' by the author.

† We feel we should be guilty of great and unpardonable

the physician engaged in the management of a Lunatic Hospital, for without great and unremitting attention to the various subjects of diet, ventilation, occupation, amusement, classification, &c. &c. he will find all his labour in vain. To these all-important auxiliaries are we indebted more particularly for the successful result of the grand experiment made at Hanwell by Dr. John Conolly, viz. the entire abolition of all kinds of restraint in the management and cure of the lunatic, and the adoption of the humane plan of treatment; a fact this, than which none other appertaining to medical history is more deserving the gratitude of the phi-

neglect, and moreover incur, and deservedly too, the censure of the man of science and the philanthropist, if we were to allow this opportunity to pass without insisting on the remedial efficacy of animal magnetism—or mesmerism—in cases of epilepsy combined with mental disease. Since our connexion with Hendelle we have succeeded in restoring one poor native lad to perfect health, who for a period of, we learn, seven years, was afflicted with epilepsy of the most distressing character. He used to have from two to five fits per day, and each one was commonly so severe as to leave him for some time more or less insensible. His appearance when first mesmerised was exactly that which belongs to the last stage of phthisis, so emaciated was he. Three months after we commenced our operations, not only had the fits *entirely* left him, but he then presented the appearance of robust health, and had become stout and really muscular. The case created a great sensation among the servants, whose remarks upon it were not a little curious. When on the eve of obtaining his discharge he was attacked with apoplexy, and died about thirty hours after. A very similar case has occurred in our private practice, and it affords us much pleasure and happiness to learn of our patient's continued good health.

lanthropist, and the esteem of all lovers of science; and one, moreover, not only well calculated, but destined to give to the name of CONOLLY a niche in the temple of fame by the side of those of Oberlin, Fry, Montague, and Clarkson.

Diet.—The diet of the insane requires, as a very general rule, to be liberal. It is not enough that those suffering from mental disease among the native population of India and Ceylon have a sufficiency of rice, with salt fish and vegetable curry. Both among the white and dark races of mankind insanity is to be seen accompanied more or less with the indications of debility; that is, with some one or more signs of suspended vital action; and if, therefore, the diet be poor, and not adapted to the wants of the animal economy, disease must be aggravated. The lunatic patients under our charge at Hendelle confirm the assertion here made, as does also all our past experience at Hanwell and elsewhere. Even in acute cases of madness, however violent the symptoms, it is of the highest importance to support the *vis vitæ.* We have frequently directed, in the most severe cases it is possible to imagine, not only a plentiful supply of good and wholesome solid food, but what is more, of the best ale and porter; and with the best effects. The insane of this country (Ceylon) require the frequent substitution of beef, mutton, and poultry, for the dried fish and vegetables they so commonly prefer with their rice. In certain forms of

insanity, *wine* proves a highly valuable remedy. In cases where the tongue is clean and the digestion unimpaired, the pulse soft, however frequent, and the head cool, wine will be found to act both as a tonic and a sedative.

Occupation and Amusement.—It is quite impossible to estimate too highly the excellent effects of mental and bodily employment on the lunatic. Not only does occupation prove an important remedial aid in the treatment of insanity, but when systematically carried out, it conduces in an eminent degree both to the comfort of the patients and the regularity of the whole household. However unaccustomed one may be with the details of a well-regulated Lunatic Hospital, nothing can be easier than to imagine the injurious tendency of idleness and ennui in the person of him whose mind is occupied with morbid delusions and fancies, and whose intellectual existence is the prey of feelings he has not the power to control. Employment tends to the withdrawal of the mind of the lunatic from the thoughts which harass and disturb it, and has the effect of directing the cerebral energies into another and a more desirable channel; it moreover diverts, as it were, the vital power diffused through the animal organism, and causes it—the vital power or force—to be expended upon the muscular system. A female patient at Hendelle, who used before our time, almost constantly and for many successive years, to be chained

to a window post, and otherwise manacled, was induced by us to occupy herself in making various small articles of matting, and in needlework. The violent conduct and mental irritability of this woman, which once rendered her a source of the most serious alarm, is now exchanged for the most peaceable and quiet demeanour. A male patient—a native vaccinator—who used to pass successive weeks in mechanical restraint of the most distressing kind, has been equally benefited by a similar treatment.* Kind words and encouragement will be found generally to conquer the most disinclined to work, and particularly so when they are combined with any other requisite treatment, medical or hygienic. By a well-arranged plan of employment of the patients in Lunatic Hospitals, not only will the numbers of those cured and relieved be increased, but the current expenses of the establishment be considerably diminished. Whilst, however, we would impress thus much on the minds of all whom this Report may concern, we would too be understood distinctly to condemn, in the most positive manner, and in no measured terms, the practice sometimes attempted of

* It should be remarked, that during the last twelve months, and under all the unfavorable circumstances which belong to the institution at Hendelle, the strait-waistcoat has been used but once, and then only for an hour or two; whereas it has been officially reported to us, that taking the average, there were at least one third of the patients constantly in some kind of restraint, and at a time too when by far the greater number of the insane were at the jail at Hulfsdorp.

rendering the labour of the insane a source of profit. We venture to hope that the above observations might prove of use, and lead eventually to the introduction of a systematic employment of the insane in the Lunatic Hospital at Colombo. The benefits which must attend such a measure have already been *anticipated* by us in even the uncertain and irregular occupation of the patients at Hendelle. At this time, it is much to be regretted, that the supply of all articles of clothing, and such other as belong to the domestic wants of the lunatic establishment, as well as all necessary repairs, &c., are furnished and executed by the Commissariat department.

The amusement of the inmates of a Lunatic Hospital is, in Europe, a matter of much interest; but few institutions of the kind being without a library, backgammon-tables, draught-boards, cards, &c.; various games, as la grâce, bowls, football, cricket, &c. &c., are allowed; and what is more, musical and dancing parties are frequent.

Classification of the Insane.—There has been no greater difficulty we have had to contend with at Hendelle than the want of a perfect classification of the patients. Their removal to the new Hospital will put it in our power yet more effectually to separate the noisy and violent from the quiet and inoffensive, the dirty from the clean, and the curable from the incurable, &c. &c., whence much comfort must result to the patients.

By referring to the table of deaths occurring in the past year, 1846, it is perceived that one case of suicide by hanging is mentioned. The advocates of the old plan of treatment would, perhaps, refer to this patient as an illustration of the insufficiency and uncertainty of another plan of treatment than that which embraced the use of the strait-waistcoat, and the other instruments of torture, once so general. The deceased here referred to had, at no time previously to the fatal act which terminated his existence, shown any destructive or suicidal propensity, and therefore were there no provisions made to counteract it. In order to prevent occurrences of this nature, it is desirable that the apartments occupied by the insane should be properly constructed. The interior of the room should be so guarded as to prevent the possibility of the patient suspending himself; whatever facilities the window frames, &c., may present can be counteracted by the employment of finely-drawn wire gauze, the structure of which is at once sufficiently strong and porous to combine the protection of the patient with the facilities of ventilation. It is of course extended and secured on the inside of the window or grating.

The clothing of the patient, and whatever bedding he may use, must be strongly made, and of such materials as will successfully resist all attempts made to tear them. If the hair be long, it must be removed, and so must also the bedstead. Such may

be said to constitute generally the domestic management of the suicidal insane; but of necessity there will remain much else to be done, not only to get rid of the propensity to self-destruction, by the removal of its cause, whatever it may be, but also to prevent the commission of the act threatened. Various medical, moral, and hygienic means will be found indispensable to the relief or recovery of the patient; and they must be employed as the skill of the physician can alone direct. We may be allowed to add that, comparatively speaking, but little good can be expected to attend the remedies used if they be not accompanied with a uniformly kind and conciliatory demeanour towards the object of our care. There must be no harshness, no rebuke, no jest in our conduct and speech, but all that we do and say must emanate from the higher and purer feelings of our nature, from our *benevolence*, *veneration*, and *conscientiousness*, directed by the REASON. However earnest our exertions may be to obtain the full benefit of the humane or non-restraint plan of treatment, unless the attention of the medical man be supported by judicious and experienced attendants, male and female, he can never hope to reap the full harvest of his labours.

All those engaged in a lunatic hospital should be animated by one universal feeling of philanthropy and love; if ever there were a legitimate field for the exercise of all the kind sympathies of our nature,

it is within the abodes set apart for the insane. How necessary then is it that the *attendants* should be of a superior kind; let it be remembered that the non-restraint plan of treatment does not only consist in the disuse of the waistcoat, leg-locks, chains, &c., and in the abandonment of the whip, and all other revengeful practices, but on the other hand it recognises the practice of all those means calculated to encourage the affections, refine the feelings, and cultivate the purer sentiments of our nature; it requires, too, the right direction of the intellectual faculties wherewithal to restrain the too active and much abused propensities of the insane. In short, the non-restraint system takes especial cognisance of whatever promotes the use and avoids the abuse of our various mental qualities, and similarly of the corporeal powers or functions; for the *mind* and *body* are but parts of one great whole; and hence does it follow that the nature of the duties required of the attendants on the insane are of a character which could not be performed by individuals of the ordinary rank of SERVANTS. The above observations apply with much force to the lunatic of Ceylon, as well as to the European insane. We would wish it to be well remembered that up to this time the patients under our charge at Hendelle have been without *attendants;* no one of necessity could presume to consider the *coolies* there employed in the light of such. We feel assured that the

Government will see it fit, on the occupation of the new building, to order the appointment of another and a better class of servants,—male and female.

In connexion with this part of our subject, we cannot but regret the late retirement of Miss Prowett, now Mrs. Ferdinands, the matron, whose experience at Hanwell, and peculiar fitness for the office she has resigned, and general excellence of character are well known and appreciated.*

* It will appear singular to the mind of the reader to be informed, that Miss Prowett, who accompanied me from England to Ceylon (and who was appointed *Matron* to the new Lunatic Hospital at Colombo by Lord Stanley), as well as the first female assistant, R. Hargrave, were not only not recognised by the colonial government of Ceylon, but were left entirely on my hands for their daily support. These young persons were not only not provided with "*board* and *apartments*," as their appointments received by them from the Colonial Office specified,—copies of which I forwarded to the local authorities, accompanied with a fair representation of their position and just demands,—but were forced on my hands, and made dependent on *me* for their daily sustenance. This state of things lasted for about ten or eleven months, until, in fact, I could stand it no longer. At my suggestion they sent in their resignations, and demanded, as a compensation, two years' salary in advance: it was given to them. The latter named proceeded to England, and there very properly recovered her passage money overland. Of course I never contemplated such an increase to my responsibilities or pecuniary obligations; however, may the above fact prove a warning to all receiving colonial appointments. The fact is, colonial folks are too often in arrears of the mother country—they cannot see so far as they should; the great and good principles of action which animate the mind in Europe they cannot appreciate; they generally occupy the rear in all matters of progress and civilization; and hence was it that Miss Prowett's position as Matron of the insane was by most people considered a

It is with no inconsiderable surprise that we should find occasion to allude to the frequent detention of the insane in the various jails in the colony. Not only is such a proceeding in every

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joke, and, I regret to say, was often made a subject of wit and satire by the gay people of Colombo.

As it has been attempted to fasten upon me the entire responsibility of the retirement of Misses Prowett and Hargrave, I have here introduced a letter on the subject, addressed by me to the Acting Colonial Secretary, P. E. Wodehouse, Esq.

"September 26, 1845.

"My dear Sir,—In compliance with your request, I here repeat, for the information of his Excellency the Governor, that my opinion is, under all the circumstances of the case, Miss Prowett and Rosina Hargrave had better be allowed to resign their situations, which they are desirous to do, and to return to England. My reasons for so thinking are these: after being in Ceylon for a period of ten months, they are still allowed to be unemployed in the duties required of them, because the government has not yet thought proper to find them with suitable accommodation at Hendelle, and to allow them, in common with Mr. Dickenson, a proper allowance for their board, &c. This has had the effect of placing them, one and all, in very unpleasant and dependent circumstances; and feeling which Miss Prowett and Rosina Hargrave are anxious directly to return home, or at any rate to give up their present appointments; and they both declare their decided intentions to do so on the expiration of the *three years,* the period to which their engagements extend. If the terms of the engagement between the Home government and Miss Prowett—for her alone does your note mention—have not been and are not carried out, she is necessarily kept from the discharge of her duties at Hendelle; and if such were not the case, the present state of Hendelle, both as concerns its general condition and particular management (and both of which I have on a previous occasion shown are incompatible with every notion of a well-regulated Lunatic Hospital) must inevitably very seriously limit the sphere of her usefulness.

way opposed to the Government ordinance of 1840; but what is more, it deprives the patients so detained of their chances of recovery, should their cases present any; or at any rate, it robs them of certain comforts and conveniences which the *Jail* cannot afford; we do sincerely hope that so serious a cause of complaint may no longer exist.*

Moreover, should the new establishment *not* be put on the improved plan of government—should it be conducted as a mere place of '*safe custody*' for the insane, as you assured me even *it* must continue to be—should the *new Lunatic Hospital* about to be erected in the Cinnamon Gardens *not* be intended as a place of *cure*, and the various remedial means employed in cases of insanity be therefore withheld,—if, in a word, it is to be but another Hendelle, and designed to perpetuate its very peculiar and pinched-up kind of management, why, then, I must say that I see but little use in securing the services of those who may be elsewhere more usefully and honorably employed. Miss Prowett is one such.

"Yours, &c.

(Signed) "J. G. DAVEY."

N. B.—It should be known, that for some months R. Hargrave lived as *nurse* in a family at Colombo, at which time she was of course independent of me. I mention this in order to anticipate any objections which might be made to the above statement.

* That the insane at the jails do not receive proper attention is proved by the fact, that various and cruel restraints are commonly imposed on them. A moorman not long since admitted to Hendelle has his wrist ulcerated from the use of handcuffs; but not the slightest necessity for restraint of any kind has since shown itself in him; and many similar cases could be mentioned by us, did we think it necessary. As an illustration of the ill effects on the mind of the lunatic of an incarceration within prison walls, I may here mention that a visitor to the jail at Hulfsdorp was once asked by an insane person, "Does the law consider lunatics crimi-

We rejoice to learn that the lepers and lunatics are to occupy distinct establishments. We had the honour to recommend this arrangement to the especial consideration of the Government very soon after our arrival in the colony; and it affords us no slight satisfaction to find that it is to be carried into effect. The comforts of both parties must be materially promoted by their separation, and the necessary discipline of both the Lunatic and Leper Hospitals more easily maintained.

During the present year, the patients at Hendelle have not suffered much from the ordinary diseases which prevail epidemically in Ceylon, in common with other tropical countries, such as fever, dysentery, and cholera; but, as may be expected, they have not been altogether free from their attacks. Of Asiatic or malignant cholera there has not been a single case. Intermittent fever (ague) is of common occurrence, a circumstance which is to be accounted for by the contiguity of the river, Kalani Ganga, and the Negombo Canal; in the immediate vicinity of both which much low and undrained waste land is to be found.

In connexion with the discharge of lunatic

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nals?" when on being told "*No,*" he replied, "We lunatics are treated just like criminals; we are allowed no betel; we are dressed and fed as criminals are; in fact, they think we are beasts, and treat us accordingly;" or words to the same effect. The lucid interval of this person was not likely to be of long duration under such unfavorable circumstances.

patients, it has on two or three occasions occurred, that on the party leaving the institution he has been without the means of procuring even the commonest food or raiment, and with no friends near to aid him. Such a condition is, of course, at all times extremely distressing, even here, where the wants of the native are few, and generally so very easily gratified; but how much more so is it where the sufferer has so recently recovered the use of his mental powers, and is thereby prepared to renew his acquaintance with the world and its uncertainties. To meet this difficulty, we would suggest that it may be allowed us to afford some discretionary relief; a mere trifle would be sufficient, even if it allowed only of the purchase of a few measures of rice. At Hanwell there is established the ADELAIDE FUND, the object of which is the relief and assistance of discharged patients.

The more convenient locality occupied by the new Hospital, and the increased accommodation which it will afford when completed, will put advantages within our reach of much moment. Among them, we may enumerate the facility of affording clinical instruction in mental diseases, and their treatment, to the Government Medical Sub-Assistants in and about Colombo, and the practicability of procuring, when requisite, the visits of the Protestant clergyman, whose co-operation is in some few cases really indispensable.

Conclusion.—In concluding these our remarks, we would hope, with the generous co-operation of the Government, and the kind support of the Principal Civil Medical Officer, to cause the principles herein expressed, in so far as they may tend to the promotion of science and the adoption of sound views of humanity, to take the place of those hitherto so generally embraced by even the medical profession and others, which, among other things, assigned to the lunatic the award of crime, and to the "*mad-house*" the horrors of the Bastile. It is not without good reason that we anticipate the universal prevalence in India, as well as in Europe and elsewhere, of other and better feelings; when the full sympathies of a generous nature shall be enlisted in the cause of the unhappy lunatic, and his sufferings thereby relieved, and his whole condition ameliorated; when stripes and angry words, and punishment of all kinds and degrees, shall be, at all times and in all places, forgotten, and their place supplied with kind words, and affectionate encouragement and regard; when the "*mad-house*" shall be viewed in the light of a "*refuge*" from the cares and temptations of the world, and a "*place of protection*" from the disappointments and sorrows common to man; as well as an *Hospital* adapted for the cure of disease, and the relief of BODILY—mental—ailment.

APPENDIX TO THE FIRST REPORT.

Since writing the above, I have perused with the highest satisfaction, and with much advantage, the excellent treatise on INSANITY, by the late Dr. Andrew Combe; and in it I find the following words:

"Phrenology has proved, and indeed it is scarcely disputed, that the brain is an aggregate of many distinct organs, each manifesting a distinct mental power. It proves that one or more of these organs may be injured or diseased, and their functions impeded or altered, without necessarily affecting the remainder, and thus explains how a man may be insane on one feeling or faculty, and sound on all the rest; and consequently how, when a different organ is diseased, the faculty or feeling that is deranged may be different, and the prominent symptoms be different, and yet the disease itself remain exactly of the same nature. Inflammation affecting the eye disturbs *vision*; and affecting the ear, disturbs *hearing;* because vision is the *function* of the one, and hearing is the *function* of the other; but still it is *inflammation* in both, and requires in both the same kind of treatment. Phrenology shows that, in like manner, morbid excitement of the cerebral

organs of combativeness and destructiveness may produce raving, violence, and fury; and morbid excitement of the organ of caution, produce fear, apprehension, despondency, and melancholy, not from any difference in the *kind* of excitement, but simply from the function of the one being to manifest the propensities first named, and from the function of the other being to manifest feeling of caution; and that hence both cases may require the same medical treatment for their removal, modified only by the difference of function; and in so far, it affords a simple and consistent explanation of all the various forms which insanity assumes, and leaves us free to observe with care the nature of organic derangement on which each depends." Again:

"To account for the variety of forms which derangement of so many mental faculties and organs may assume, the advocates of the unity of the organ of mind are constrained to create a new malady for every change in the appearance of the mental symptoms; and following the wide variety thus presented, they conjure up a list of mental diseases, numerous and complicated enough to damp the ardour of the most diligent and determined student, and at the same time running so much into each other as to defy all attempts at discriminating or describing them."

There is good reason to believe that had Gall and Spurzheim never lived, we must have waited yet

some time for the expression of opinions so valuable and exact as these of Combe; for no one need be told that a knowledge of the healthy uses of an organ must precede anything like a correct acquaintance with its diseases. For my own part I must confess that all my notions of insanity were of the most crude and unsatisfactory nature until I learned phrenology, or the physiology of the brain as taught by Gall and Spurzheim, and Mr. George Combe; and when I had done so the abnormal phenomena afforded by my patients at the Hanwell Lunatic Hospital became not only very easily understood, but much more certainly and effectually treated. The mysteries of the mind and of lunacy fade alike into insignificance before the light of phrenological science; with its aid the brain comes to be regarded as a part and parcel of the human organism, and as subject in common with the liver and lungs, &c., to similar organic laws and sympathies; the several parts of the *brain*, like the several parts of the *eye* and *ear*, are thus seen to be linked together in one harmonious whole; and just as in the latter instances, *vision* and *hearing* result from a well-adjusted balance of the several parts of the *eye* and *ear*, and the due performance of their individual and specific functions in either organ, so does *cerebration* (Engledue) result from or depend upon a well-organized brain with its several parts duly balanced and adjusted the one to the other. The application of the *principle* herein involved, is

sufficient for the complete elucidation of all cases of insanity, of *mental disease*, or my own unaided reflections could never have harmonized so satisfactorily as I have found them to do with the experience of Spurzheim and Combe. I mention this much to show not only how indispensable is a knowledge of the doctrines of Gall and Spurzheim to mental pathology, but how far their *discoveries, alone and unaided*, will go towards its elucidation. I never read Doctor Andrew Combe's book on Insanity until the present year, 1848; but in 1842, and on many occasions subsequently, I have advocated precisely similar doctrines to those found in this able work.

In a paper read by me, before the Phrenological Society at London, in June 1842, entitled "PHRENOLOGY and INSANITY," are these words, "What the many parts of an entire piece of machinery are to each other, so are the nervous, the nutritive, and the respiratory systems in man . . . and their relationship to each other, and to the whole organism, is well illustrated by the mutual dependence of the individual parts of the entire brain, and these again to the cerebral mass." It is therein argued, that the health of the body was no more the consequence of a proper and well-regulated exercise and adaptation of the several systems named, than the health of the mind was that of a brain, with its several organs or parts duly balanced and set in order. Again, "Disease, it is well known, is either congenital or

acquired; and this is true, whether it relate to the brain, heart, lungs, or liver; or, in fact, to any one organ of the many which make up the entire organism of man. . . . . Thus, then, we see that *size* must be held as a measure of power, not only when considered in reference to the *brain,* but also when viewed in connexion with the other parts of the entire system; and this position is equally true, whether we regard the whole brain or its individual parts. . . . . I think the *cerebrum* may be very properly compared to a musical instrument, which, during *health,* if I may so express myself, has no one note unbalanced by another. If we listen to the notes of a musical instrument, and perceive what is called the *pitch* of one note longer and louder, that is, *higher* than the rest, we immediately declare the *instrument* out of tone." I will leave it to the reader to apply this allegory.*

* . . . "different passions more or less inflame,
As strong or weak the *organs* of the frame;
And hence *one* MASTER PASSION in the breast,
Like Aaron's serpent, swallows up the rest.
As man, perhaps, the moment of his breath,
Receives the lurking principle of death;
The young disease, that must subdue at length,
Grows with his growth, and strengthens with his strength:
So, cast and mingled with his very frame,
The mind's disease, its RULING PASSION, came;
Each vital humour which should feed the whole,
Soon flows to this, in body and in soul:
Whatever warms the heart, or fills the head,
As the mind opens, and its functions spread,

In my medico-legal reflections on the trial of Daniel M'Naughten, published in 1843, are these words: "The term *insanity* conveys the idea of unsound mind; and in order to express its varieties, the words mania, monomania, melancholia, dementia, &c., are in common use. Such import no more than a very general notion of the character of the disease. If the reader bear in mind the preceding remarks, and the principles upon which they are based, he will readily understand how the brain, like any other viscus, may suffer from repletion or collapse; that its function may become impaired in consequence either of general or local alteration of structure; or, in other words, that a part only of the whole organ may become affected with disease, the remainder preserving its normal or healthy character. Disease of the brain, then, may either be confined to a part, or it may affect the whole of the organ; and the disease or impairment of function may be at the same time either the consequence of excessive or dimi-

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Imagination plies her dang'rous art
And pours it all upon the peccant part.
Nature, its mother; Habit is its nurse;
Wit, Spirit, Faculties, but make it worse;
Reason itself but gives it edge and power,
As heaven's blest beam turns vinegar more sour." POPE.

The above extract shows its author to have been by his very nature a physiologist of no mean order; one would almost think Pope had received the mental impressions, which must have preceded the composition of the above lines, from a study of the *monomaniac.*

nished action; and, in any case, it may be functional or organic, idiopathic or symptomatic. The indications of these several pathological conditions are recognised by the general term INSANITY. Now, disease of any part of the body, including of course the brain, is marked by an interruption to its particular and healthy action, and hence it must follow, that if the cerebrum or brain possess parts or organs whose functions consist of respectively caution, veneration, self-esteem, firmness, acquisitiveness, destructiveness, combativeness, ideality, gaiety, hope, &c., that a derangement of the *mind,* considered in the abstract, may be caused by disease affecting *one* or *two,* or more, of such functions exclusively. Herein consists the only clue whereby to unravel the mysteries of mental derangement—of, in one word, *insanity.*" The *physiologist* recognises in the several structures composing any single viscus of the body a variety of uses; each one, although distinct from the other, contributing its specific aid towards the due performance of the allotted *function,* whatever that may be; and the *pathologist* cannot hope for much success if he neglect so good an example of analysis and research. The same principles which guide the medical philosopher in his investigation of disease of the heart, lungs, kidney, eye, ear, &c., should direct him when the brain is the organ receiving his attention.

The importance of the above view, in so far as the *nature* of insanity is concerned, is well

demonstrated in the medico-legal conclusions, inseparable from them. It is well known that the *law of lunacy* measures the responsibility of the insane by the *understanding;* and inasmuch as it is shown that the state of the intellectual faculties can be no criterion of the condition of the affections and propensities in either the sane or insane—that the same state of the former may be and are commonly associated with totally dissimilar moral sentiments and desires—that the '*understanding*' does not so much control the propensity to violence and crime as the affections, and that therefore *it* can be at no time the measure of the responsibility of the criminal, sane or insane—it must necessarily follow that the sooner this said LAW OF LUNACY is blotted from out the statute-book of the empire so much the better for the *law* and *lawyers;* and if not for it and them, for REASON and HUMANITY'S SAKE.

The judges of the present day, like those of the olden time, persist in declaring all persons to be *sane* and *responsible* who can distinguish *right* from *wrong.* Lord Hale's dictum continues yet to influence both our legislators and lawyers. The bar and the bench alike continue to grovel in the mire and obscurity which characterise the public acts of such men as Mansfield, Erskine, Denman, Abinger, and Follett, as shown on the trials of Bellingham, Hatfield, Oxford, Blacklesley, and M'Naughten, to which the reader is here referred as an illustration of the false reasoning

employed by the legal profession in matters relating to the question of insanity.

I would beg leave to introduce to the reader's attention the following extracts from my medico-legal reflections on the trial of Daniel M'Naughten.

"The intellectual capabilities of a very large number of even the most decidedly insane, and those found most troublesome to manage at Hanwell, are in every way sufficient to the ordinary purposes of life; are in fact, so far as their understanding alone is concerned, in no way altered from that they originally were. Under circumstances of excitement, of violence, whether or not attended with incoherence or temporary delusive notions, they retain as complete a *consciousness* of everything, and of their speech and actions, as the attendants about them. However extraordinary it may appear to persons unaccustomed to the insane, yet is the idea of supposing them generally ignorant and insensible of all the *sane* are acknowledged to take cognisance of, no less erroneous than it would be to declare a patient unconscious of the more ordinary manifestations of disease or derangement of any other portion of our organism. The only difference is in the signs or symptoms of the respective diseases. In all cases of *insanity,* the speech and actions of the lunatic must be regarded only in the light of *symptoms* of the abnormal condition of the affections and propensities; which, under circumstances of

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health as well as *disease*, impart the *character* to man. An apt yet highly painful illustration of the nature of our position is afforded in the condition of one suffering from hydrophobia; though impelled to the most extraordinary and rabid conduct, the sufferer still retains a perfect *consciousness* of all he may do or say. We have observed this till within even a very short period of dissolution.

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"If consciousness, moreover, be the test of insanity, I am at a loss to comprehend the cases of by very far the greater number of the patients in the Hanwell Asylum. And if the English law, as it at present is constituted, excuses only that man from the consequences of a criminal act who cannot distinguish between right and wrong, and who does not know what he is about, then do we say, the sooner it is altered the better. *Of course our legislators are desirous to frame the laws which govern man in accordance with his nature.* In the Hanwell Asylum there are about 990 patients; and of this number, from 400 to 500 are daily occupied in the various domestic concerns of the establishment; in trades, and labouring occupations. Now, of what use would employment be to these people, if they knew not what they did? If, too, as insane people, they were unconscious of their acts, and ignorant of the objects which surround them, how is it they prove so expert

in the various handicrafts of life? It is a mere delusion on the part of the *sane* to suppose that the insane generally—I do not mean those suffering from partial insanity only—have not a perfect use of both their perceptive and reflective faculties; *that is, in the abstract.* If we except those in the very last stages of the disease, the wards of every lunatic hospital will afford innumerable proofs of our position. By far the larger part of the brain ministers to the moral and animal feelings, and the smaller or anterior part to the intellect only; and therefore it is, as it should be expected, the latter is less frequently diseased than the former. And in the same manner that the sense of sight occasionally becomes the tool of the imagination, and under its influence gives "to airy nothing a local habitation and a name," so do the intellectual powers, under circumstances of derangement of the affections, the moral feelings, and propensities, become, as it were, their agent, whose duty, it may be said, is to proclaim aloud the nature of the otherwise concealed and awful malady. This is precisely the case with more than two thirds of the patients we are acquainted with. It is not generally known that, during even the most violent attacks of complete and raging madness, the patient generally takes the most correct cognisance of everything around him. Nothing oftentimes can escape him, not even a word, a look, nor the most trifling circumstance. He is fully sensible of every attention, of

every kindness, and on his recovery from the violence of the attack, he will apologise for whatever he may have done or said at all indelicate or disrespectful; and express, too, his great obligations for the care taken of him. There is at present in this institution a young man of much respectability, and who has had the advantage of a good education, unfortunately subject to the most violent attacks of recurrent mania. During the paroxysms he is seldom incoherent, but so dreadfully is he preyed on by the morbid excitement of his propensities, that by the time the diseased action of the posterior part of the brain has reached its climax, he presents a fearful spectacle of the animal. At this time we do not suppose any man is to be found, however sanguinary his nature, who, if he saw this patient, would for one moment entertain the slightest doubt of his total irresponsibility; yet he knows well everything he does and says, is perfectly conscious, and as sensible of right and wrong as any man, however sane. When in health, this young man is not only highly intelligent, but of excellent moral character, and very amiable. In less acute, and particularly in chronic, cases of this description, which the reader will bear in mind make the bulk of the patients within the walls of every lunatic hospital, it is generally easy to exercise a very considerable moral influence over the individual: how could this be effected if *he were unconscious and insensible of right*

and wrong, and ignorant of whatever may be said or done? It must ever be borne in mind, that the speech and actions of the lunatic, constituting as they do the *indications* of the disease which affects the brain, are in a very large majority of cases but the manifestations of a disorder of the affections and propensities, over which the intellectual powers have not only no control, but are themselves made the mere instruments of their excitement or irregularity.

"To regard an insane person responsible for his acts because he knows *right* from *wrong,* and to inflict upon him the punishment which the law awards to *crime,* is no less absurd than it would be to hold him who is afflicted with chorea or St. Vitus's dance amenable for his irregular muscular contractions and unsteady gait. There is a more complete parallel between the two cases than any one who is not acquainted with pathological science would imagine. In both instances we have an apt illustration of a derangement of some part of the nervous system; the external symptoms of which are, in aggravated cases of either kind, as completely removed from the influence of volition, as is the continuance of the ordinary bodily functions."

For a more complete exposure of the *law of lunacy,* see a paper read by me at the London Phrenological Association, in July 1843, entitled "*Criminal Insanity,*" the same being an *Analysis of*

the famous Questions and Answers of the Peers and Judges, about that time made public.

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In the history of medical literature, and particularly of that belonging to mental science, it might one day appear both remarkable and interesting that a physician should, in the year 1844, publish a book entitled the 'Duality of the Mind,' and claim for *it* both originality and perfection. That Dr. Wigan was an elegant scholar and an accomplished man I do not doubt; that his talents and experience were of a high order is certain, and that he believed himself the *first* discoverer of the *duality of the mind* appears evident; but that he should have succeeded in persuading the readers of the 'Lancet' and the medical public generally, including the sharp-sighted critics of the medical press, of his originality, is to me *surprising,* nay more, *unaccountable.* The doctrine of the *duality of the mind* is almost "*as old as the hills,*" as I endeavoured to prove, in a communication contained in the 'Lancet' for June 15, 1844. That Dr. Wigan is or was plainly uninformed of the writings of Boerhaave, Van Swieten, Haller, Gall, Bichat, and Spurzheim, cannot be doubted; or that gentleman would have known not only that these several writers here named taught the *duality* of the mind, but, moreover, *that* Dr. Holland is not "*the only writer who has advanced one single step to prove this doctrine.*" If the reader

will take the trouble to refer to Holland's 'Medical Notes and Reflections,' he will find the author himself awards to Bichat the credit of having written "*most explicitly on the symmetry in the organs of animal life, and the effects of default of this, either from natural conformation or disease.*" Dr. Holland's book was published in March 1839; whereas in 1799 Bichat published his 'Researches on Life and Death,' and from which the author first named has evidently borrowed largely.

Let us see what further proof of the position I have taken can be brought forward. I am unable to QUOTE Boerhaave, and in mentioning his name among those who taught *the duality of the mind,* I have done so on the authority of, I think, Spurzheim. Van Swieten observes, that " as the consciousness of impressions in two similar organs is single, as, for example, in the two ears, two eyes, &c. &c., so *mental consciousness* generally is single, though the brain be double." Haller's great work on *Physiology* will furnish the reader with analogous reasoning; and so will Gall's works, published at Paris in 1810. The first three chapters of Bichat's work *on Life and Death* are devoted to the elucidation of Dr. Wigan's views ! ! !

Life, by Bichat, is divided into *animal* and *organic*; the former is executed by organs which scarcely ever present any variety of conformation. He says : " The functions of every organ of the animal life are imme-

diately connected with the resemblance of the organ to its fellow on the opposite side if double, or if single, to its similarity of conformation in its two halves; from hence the influence of organic changes upon the derangement of the functions may be well conceived. . . . . But this assertion will become more sensible when I shall have pointed out the relations which exist between the symmetry and the irregularity of the organs, and the harmony and the discordance of their functions."

Bichat then proceeds to treat of the *external senses*, and having demonstrated how much their healthy condition depends on the symmetry of the organic structures concerned on either side of the body, and contrariwise, he passes on to the "*duality of the* MIND," the healthy manifestations of which he makes dependent on the synchronous action of the two hemispheres of the brain, and its diseased conditions to result from their want of harmony.

Bichat concludes the argument thus : "I now conceive myself to have proved, that with inequality of action in the hemispheres there must be confusion of intellect. I have also pointed out some states of disease in which such confusion is evidently the effect of inequality of action so occasioned. Here we see the effect and its cause ; but may we not from analogy infer a similar cause where we see a like effect? when the judgment is habitually incorrect, and all the ideas wanting in precision, may we not be induced to be-

lieve, that there does exist a defect of harmony in the action of the two hemispheres of the brain? We see inaccurately if nature have not given to both eyes an equal power; we perceive and judge inaccurately, in like manner, if the two sides of the brain are naturally dissimilar. The most correct mind and the soundest judgment presuppose in the hemispheres a perfect harmony of action; and what a multiplicity of shades do we not behold in the operations of the understanding! It is probable that they all of them correspond to so many varieties in the proportions of power in the hemispheres."

Spurzheim writes: "The two hemispheres of the brain, *and the individual parts or organs of each,* may be in different and quite opposite states, and produce different affections. . . . In giving the histories of cerebral injuries, the duplicity of the nervous system has very generally been forgotten; but one half of the brain may be destroyed, and the various faculties still be manifested by the other of the opposite side, just as one of the optic, auditory, or olfactory nerves may be destroyed, without our being blind, deaf, or deprived of our smell. It is well known, too, that the two hemispheres of the brain may be in very different states of health." Spurzheim cites cases from Gall and Tiedemann, and Dr. Parry, of Bath, wherein the inharmonious action of the two hemispheres of the brain was marked by "*double vision,*" or "*double consciousness,*" and

"*double hearing.*" He tells us that one of Gall's friends, a physician, often complained that he could not think with the left side of his head—the right side was an inch higher than the left; and that Gall attended a gentleman who for three years heard peasants insulting him on his left side; but he commonly discerned his derangement and rectified his error.

From the above I feel justified in asserting that Dr. Wigan's DUALITY OF THE MIND was made known to the medical profession something like ONE HUNDRED YEARS before that gentleman published the treatise which bears his name; that both the *premises* and the *conclusions* set forth by Dr. Wigan have been long recognised and appreciated; and that moreover to the very imperfect doctrine of the *duality of the mind,* as taught first by Boerhaave, Van Swieten, Haller, and Bichat, succeeded—*nearly* SIXTY YEARS *before* Dr. Wigan's *book issued from the press*—Gall's splendid and imperishable discoveries of the "PLURALITY *of the mind.*" It was Gall's dissatisfaction with the opinions advocated by his predecessors and contemporaries concerning the brain and its functions, that prompted hin to commence and carry through those labours which went to demonstrate not *only* the "*duality of the mind,*" but what is more, the *plurality of the mind.* That the industry and research manifest in the writings of Boerhaave, Van Swieten, Haller, and Bichat materially aided Gall

in his original investigations cannot be doubted; and that therefore the *duality of the mind*, as they taught it, much facilitated those labours of Gall with which his great name must be for ever associated. Moreover, without the phrenological doctrine, the superstructure raised by Dr. Wigan on his partial views of mental philosophy, viz. the *duality* of the mind, must break down, fall for want of the necessary support; his *conclusions* are incompatible with his *premises*, and for confirmation of which I beg leave to refer to my paper in the 'Lancet,' above mentioned.

I may add in this place, that in no department of medical science is there a greater necessity for a change than in that of insanity—I refer to the worse than useless arrangement and nomenclature of mental disorders, as they are at present recognised. A correct acquaintance with the *physiology of the brain* as taught by Gall and his followers, can alone dispel the darkness which at the present veils this subject. *Nature* and *truth* would appear at a sad discount, to judge from the character of the most recent publications on insanity, viz. Wigan's *Duality of the Mind*, and Johnson's *Arrangement and Nomenclature of Mental Disorders*. The latter is a PRIZE ESSAY, under the patronage of the "SOCIETY FOR IMPROVING THE CONDITION OF THE INSANE!!!" Both of these works

are certainly clever and ingenious, and their authors men of high character and worth, but unhappily a little behind the day, not quite on a par with the *spirit of the times* they live in.

The Second Report of James George Davey, M.D., *Medical Superintendent of the Government Lunatic Hospital, Ceylon. Presented January* 1848.

Our last Report mentioned the progress of the new Lunatic Hospital at Marandahn towards completion; it is now our pleasure to notice the removal of the insane from the old Dutch leper establishment at Hendelle to the new Lunatic Hospital. This highly desirable event took place on 4th September last, and although the new building was *not* in that complete and finished state at this time that may have been wished, yet are we satisfied that the removal of the patients was attended with much comfort and many advantages. The ruinous and wretched state to which Hendelle had arrived, the general insecurity of the apartments occupied by the insane, and the miserable appearance of the whole place, imperatively demanded its vacation, and especially by lunatics. The separation of the lepers from the insane, and their occupation of a distinct establishment, is a circumstance well deserving our commendation. The good results which we anticipated in our last Report (1847) have been, we have much reason to believe, fully realized; the lunatics are no longer the recipients of the many species of

indignities and annoyances of the lepers; and, removed from their presence, necessarily escape those sources of irritation once so productive of discord and noise.

In close connexion with the occupation of the new hospital at Marandahn, it becomes us to mention the domestic arrangements there introduced—we allude to the servants of the establishment, and the improved regulation of their several duties. The attendants on the patients are no longer required or allowed to mix themselves up with the domestic drudgery, as cooking and the like; but are held responsible only for their care of the insane; an arrangement which we conceive to be highly conducive to the right government of the hospital, as well as eminently calculated to promote the comfort and well-being of its inmates. In our correspondence with the Honorable the Colonial Secretary in 1845, we had the honour to recommend the adoption of a like arrangement to that above mentioned, as well as that one which provided the attendants and servants with their *board*. The latter is, there can be no doubt, necessary in every public establishment, of whatever kind, not only to prevent acts of dishonesty occurring, in so far as the purloining of articles of diet are concerned, but what is of equal if not of greater importance, to secure to the patients their due allowance of food and drink.

On the 1st of January, 1847, the Lunatic Hospital contained 57 patients, of whom 40 were males, and

17 females. In the annexed table is seen the various forms of mental disease from which these 57 patients suffered, together with their numerical proportions.

	M.	F.	TOTAL.
Mania	15	3	18
Suicidal mania	1	0	1
Recurrent mania	2	2	4
Chronic mania	12	10	22
Monomania	1	0	1
Melancholia	3	0	3
Epilepsia	1	1	2
Congenital idiotcy	0	1	1
Imbecility	5	0	5
Total	40	17	57

There have been admitted since, that is, during the year 1847, 42 cases, of which there were—

	M.	F.	TOTAL.
Mania	17	3	20
Suicidal mania	0	0	0
Recurrent mania	1	0	1
Chronic mania	10	6	16
Monomania	0	0	0
Melancholia	1	0	1
Epilepsia	0	0	0
Congenital idiotcy	0	1	1
Imbecility	3	0	3
Total	32	10	42

The addition to the 57 cases remaining in January 1847, of those afterwards admitted in the current year, viz. 42, makes the total number of insane treated in 1847 to amount to 99, as is here shown :—

	M.	F.	TOTAL.
In the hospital on January 1st, 1847	40	17	57
Admitted since . . .	32	10	42
Total	72	27	99

If from these we deduct the discharged and dead, thus—

	M.	F.	TOTAL.
Discharged	10	4	14
Dead .	10	3	13
Total	20	7	27

it will be seen that, *exclusive of the desertions*, there are remaining in hospital on the 1st of Jan., 1848, 72 patients, of whom there are—

Males	52
Females	20
Total	72

Of the 27 cases here reported as "discharged" and "dead," there were—

	M.	F.	TOTAL.
Mania . .	8	1	9
Recurrent mania . .	1	0	1
Chronic mania . .	10	4	14
Melancholia . .	2	0	2
Congenital idiotcy .	0	1	1
Total	21	6	27

So far as regards the *desertions*, to which allusion has just been made, we much regret they should appear so numerous as they do—so many as 14 male patients have escaped from the hospital in the past year (1847)—a circumstance to be explained, *in*

a great measure, by the absence of all kind of security at Hendelle, as well as by the close proximity of the establishment to the jungle; its great distance also proved a constant cause of the unavoidable absence of one or more of the servants at the Fort or market-place. It is true, two or three escapes have occurred at the new hospital at Marandahn; but they are to be referred, mainly, to the temporary inconveniencies and irregularities inseparable from the recent occupation of the hospital.

Subjoined is a record of the deaths above given, from January 1st, 1847, to the 31st of December of the same year. Number of deaths 13.

DISEASE (CAUSE OF DEATH).	M.	F.	TOTAL.
Inflammation of the peritoneum . .	1	0	1
Dysentery . . .	1	0	1
General debility . . .	7	2	9
Bodily injuries inflicted by another patient	0	1	1
Found dead . . .	1	0	1
Total	10	3	13

Of the 10 deaths which occurred among the males, 3 were cases of mania, 1 of recurrent mania, 5 of chronic mania, and 1 of melancholia; of the 3 deaths among the females, 2 were cases of chronic mania, and 1 of congenital idiotcy.

From the foregoing statement of facts, as they concern the admissions, discharges, escapes, and deaths in the past year 1847, considered in relation to the number of patients remaining in hospital in

January of the said year, it follows, as above stated, that there remain now (January 1st, 1848) under treatment 58 patients; among whom there are—

	M.	F.	TOTAL.
Mania . . .	11	5	16
Chronic mania . .	13	14	27
Suicidal mania . .	1	0	1
Recurrent mania . .	1	2	3
Monomania . .	1	0	1
Melancholia . . .	1	0	1
Epilepsia . . .	1	1	2
Imbecility . . .	6	0	6
Congenital idiotcy . .	0	1	1
Total	35	23	58

In the annexed table (p. 139) is contained not only a summary of the preceding facts, but also those of the three preceding years, viz. 1844, 1845, and 1846; and it is so arranged as to demonstrate at one view all the circumstances above stated, as they concern the admissions, deaths, &c. &c.

It must be remarked, in connexion with this table, that—

1st. The number of *admissions* includes those among the *deserted* who have been found and sent back to the hospital readmitted.

2dly. Three of the 14 patients recorded as having effected their escapes, were, at the period of their eviction, in a state of convalescence from mental disease.

TABLE showing PER CENT. of DEATHS of the average Number of PATIENTS treated in the LUNATIC ASYLUM at COLOMBO, from 1844 to 1847 inclusive.

MONTHS.	1844.						1845.						1846.						1847.						
	Remained.	Admitted.	Total.	Discharged.	Deserted.	Died.	Remained.	Admitted.	Total.	Discharged.	Deserted.	Died.	Remained.	Admitted.	Total.	Discharged.	Deserted.	Died.	Remained.	Admitted.	Total.	Discharged.	Deserted.	Died.	Remaining 31st Dec.
January	19	..	19	..	..	..	20	..	20	..	..	1	44	5	49	2	..	1	57	3	60	1	2	1	
February	19	2	21	..	..	1	19	3	22	..	..	..	46	6	52	..	2	1	56	1	57	..	1	..	
March	20	..	20	..	..	..	22	..	22	..	..	1	49	3	52	..	2	3	56	3	59	1	1	1	
April	20	1	21	..	..	..	21	1	22	..	..	..	47	1	48	..	..	1	56	2	58	2	3	..	
May	21	..	21	..	..	1	22	2	24	2	..	1	47	..	47	..	..	1	53	..	53	..	..	..	
June	20	..	20	..	..	1	21	..	21	..	..	..	46	3	49	1	2	..	53	10	63	2	..	2	
July	19	..	19	..	..	..	21	35	56	1	..	1	46	5	51	..	1	..	59	4	63	3	2	..	
August	19	4	23	..	..	..	54	1	55	..	..	..	50	2	52	1	..	..	58	4	62	1	3	..	
September	23	..	23	..	..	2	55	1	56	1	..	1	51	6	57	..	..	..	58	3	61	..	..	1	
October	21	..	21	..	..	1	54	1	55	1	..	1	57	..	57	..	..	..	60	3	63	..	2	5	
November	20	..	20	..	..	1	53	1	54	5	..	1	57	2	59	..	1	..	56	3	59	2	..	2	
December	19	1	20	..	..	..	48	..	48	2	..	2	58	..	58	..	..	1	55	6	61	2	..	1	
Total	240	8	248	..	..	7	410	45	455	12	..	9	598	33	631	4	8	8	677	42	719	14	14	13	58
Average monthly sick	..		21	..	....				38	..	....				53	..	....				60				
Proportion per cent. of discharges and deaths to number treated	..		*33·3	..	....				23·7	31·6	....				15·1	7·5	....				21·7	23·3			

* This proportion of deaths in 1844 shows a diminution of about 16 per cent., if viewed in connexion with that which obtained in 1843 at Hendelle, in which year the mortality among the insane was as high as 59 + per cent. About this time the question of the amelioration of the insane was first agitated.

In our last Report we alluded to the escapes of convalescent patients in these words: "It is also too true that so soon as an insane patient becomes convalescent, and therefore in sufficient possession of his natural mental powers to perceive the facilities which the institution at Hendelle affords him to make his escape, he not unfrequently anticipates the formal discharge which is awaiting him by leaving at his own discretion. We have also to regret the untimely removal by friends of recovering patients."

It is with no trifling regret we notice the increased mortality among the lunatics under our charge during the past year (1847) as compared with that of preceding years. We had hoped, and confidently anticipated, that the per centage of deaths would have continued to *diminish,* as it has done progressively in each succeeding year—omitting that one just now passed, viz. 1847—since our duties commenced; that is, from our arrival in the colony in December 1844, as a reference to the above table will testify. It is deserving of observation, that the decease of the majority of the patients occurred after their removal to the new Lunatic Hospital at Marandahn; a circumstance which probably might create a belief in the unhealthiness of this locality —a conclusion we do not, nor cannot, feel ourselves justified to draw. The absence of any source of *malaria*—with the exception of the decaying and

decayed vegetable matter, which everywhere abounds in tropical countries, and in Ceylon particularly— and the general dryness of the soil at and about the building, must disincline every unprejudiced mind to favour such an opinion as the above. Moreover the general immunity of the insane from both endemial and epidemical disease in the past year, and even during the rainy season, strongly negative the same. We have found from frequent inquiries at the Jails in Colombo, both at Marandahn and at Hulfsdorp, that the healthiness of the inmates of the Lunatic Asylum has greatly exceeded that of either of the public establishments named. Whilst a reference to the written records of the Lunatic Hospital under our charge will show the number of *sick*, in the months of *September*, *October*, and *November*, at no time to have exceeded *four* per cent., it will be found, on a proper inquiry, that at the Jails at *Marandahn* and *Hulfsdorp*, it—the number of sick —varied from six and a half to eight and a half, and even *nine*, per cent. This *fact* must be held as highly satisfactory; and as affording, to say the least of it, the strongest circumstantial or presumptive evidence in favour of the locality fixed on as the *site* of the institution for the insane at Ceylon. A second rainy season—the sickly season of this country—might possibly negative the assumption made, but with our present amount of evidence, we feel ourselves justified in commending

the site chosen. The position of the Lunatic Hospital is one so admirably calculated to protect its inmates from the injurious effects of the cold land-winds, so much and properly feared here, that to this circumstance alone are we disposed to attribute the comparative healthiness of the insane since their occupation of the new building.

By referring to the causes of the several deaths in the past year (1847), it is seen that *general debility* is the one assigned to *ten* out of the whole number, viz. 13; and one only died from disease held to be referable to *miasma*, viz. *dysentery*. From it some few of the patients suffered slightly, and *two* very severely; one of which cases terminated fatally. Pyrexia, or slight fever cases, have been of occasional occurrence, as may have been very properly anticipated. Why the demise of the patients in such numbers should have occurred so soon after their removal from Hendelle is, it may be said, uncertain; the circumstance may perhaps be considered a mere accident: six deaths in one month is, of course, by no means usual—yet does the occurrence fail to astonish us, when it is remembered that the rainy season in Ceylon is, in so far as the rate of mortality is concerned, what the early winter is at home; and it was during the rainy season this unusual number of deaths happened. All those persons who labour under *general debility*, a term which is understood to convey a breaking-up of the vital energies without appreciable

or organic lesion—a state of things so common to the insane—struggle on, more or less smoothly, through fine and warm weather; but directly upon the fall of the thermometer they sink—die from sheer exhaustion—and so must we account for the mortality mentioned here;* and which, in our opinion, in no way affects the question of *healthiness* or *sickness* as they here concern the insane patients.

In strict connexion also with this division of our Report is the matter of *diet*; nor can we treat it as we should do, without considering the present dietary allowed for the lunatics, and its probable effect on their health and longevity. The daily allowance for each European consists of twenty-six ounces of solid food, including twelve ounces of bread, twelve ounces of uncooked meat (beef), and two ounces of rice, and which is equal to 182 ounces of solid food weekly. The daily allowance for each native patient consists of twenty-nine ounces of solid food, including three ounces of rice cake or hoppers, eighteen ounces of rice, and eight ounces of meat (beef), and which is equal to 203 ounces of solid food weekly. The above disposition of animal and vegetable food as they affect the two classes of patients, European and native, assumes probably that the additional quantity of *meat* allowed to the European daily is more than equivalent to the larger quantity of rice given to the

* It was forgotten to be mentioned in the text that *one* little girl was sent to the hospital *in a dying state*, and died shortly afterwards of "general debility."

native patient; but such may perhaps, with good reason, be doubted; for it does not appear to us that four ounces of the beef of this country contain more, or even so much, nutriment as seven ounces of rice, or rather farina; and if not, then is the native lunatic better fed than the European insane. We would take this opportunity to recommend the adoption of an improved dietary for the *European* patients; we feel assured that the solid food at the present allowed is not only insufficient in quantity, but, what is a very material point, it does not embrace that *variety* it should do.

As regards the *quantity*, 182 ounces of solid food weekly are considered by the best writers on dietetics and insanity to constitute a diet much too low for the requirements of the insane. In the best-conducted lunatic hospitals at home, the solid food, *exclusive of vegetables,* and consisting of meat and cheese, and of puddings, bread, and other farinaceous articles, amounts, on an average, to 225 ounces per week; and that is without including *vegetables,* as potatoes, beans, cabbage, &c. We would take the liberty to suggest an additional allowance of *bread* or *rice* for the European patient, as well as the daily use of *vegetables,* by which I mean the potato or yam, bean, pumpkin, and brinjall. The introduction of some *variety* in the articles of diet is, doubtless, of much importance; the patients frequently complain of the sameness of their food. The occasional substitution of mutton, or fish, or poultry,

for the beef now in daily use, would prove a great comfort to the patients, and contribute materially to the maintenance of their health, and favour in no slight degree the chances of cure.

The penny now authorized for the purchase of *fish* for each patient, when *meat* is not issued, is, we learn, far from sufficient, nor does it represent, as we think the sum allowed ought to do, the cost of the *beef*, for which it is intended to be the substitute.

Dr. Conolly, in his recent work, 'On the Construction and Government of Lunatic Asylums,' has these words: "There is reason to suppose that insane patients, shut within the bounds of an asylum, and necessarily leading a monotonous life, require, as prisoners are said to require, a greater quantity of food than persons do who are at large. It seems at all events to be established in asylums, that a low diet conduces to a high mortality, and that the deaths diminish when the diet is improved; facts not difficult of belief, if we remember the number of feeble, paralytic, and phthisical patients in all asylums, and the number sinking from chronic and obscure disease; in all of whom life is capable of remarkable prolongation by careful management." In the work of Dr. Thurnam, 'On the Statistics of Insanity,' recently published, is exhibited the diet, and the proportions of recoveries and of the mortality in seven county asylums in England—and he has clearly shown, that the proportion of recoveries and of deaths has a

close and indissoluble relation to the dietary in use at each institution; that the better and more liberal the diet, the greater is the per centage of cures, and contrariwise that of the deaths. In 1839, the diet in use at Hanwell was much improved, and considerable additions made thereto at the suggestion of Dr. Conolly; and the good effects which immediately manifested themselves are proved by the fact, that whilst the proportion of recoveries from 1831 to 1839 was 22·12, that from 1839 to 1843 was 28·75; and that, whilst the mean annual mortality from 1831 to 1839 was 11·69, that from 1839 to 1843 was 8·56. When the Medical Sub-Assistant resident at the Lunatic Hospital purchased the provisions, he was enabled, with the twopence farthing per day allowed for each person, exclusive of the monthly allowance of rice, viz. twenty measures, or forty pounds per head, to provide not only a change of diet for the patients by the purchase of fish, &c., but what is more, to furnish them several times weekly with some kind of vegetables, such as the sweet potato, yam, jack fruit, beans, and pumpkin, and occasionally with bananas and cocoa-nuts; these latter were commonly to be had on the premises at Hendelle, where they grew to great perfection, and in great numbers. Whereas, since July last, when the provisions were commenced to be supplied to the asylum from the commissariat department, the patients have not only been compelled to live unceasingly on one unvarying

diet, beef and rice, day by day, for ever, but also deprived of the use of every kind of vegetable food and fruit; and these two circumstances we cannot do less than regard as in some way concerned in the increased mortality of the past year; for, as has already been shown, so many as ten out of the thirteen deaths recorded were caused by "*general debility*," and not by acute disease, or abnormal action of any kind originating in malaria, or common to the rainy or sickly season of the country.*

* As this question of diet has been *of late* much canvassed and been made the excuse for much anonymous correspondence, and the vehicle of no small share of personal abuse and low prejudice in the columns of the public papers of Colombo, I have here, for truth's sake only, chosen to submit the following correspondence to the reader; who will be pleased to bear in mind that nearly a twelvemonth has now elapsed since *the Report* above was composed and delivered to the Government.

"Principal Civil Medical Officer's Office, Colombo;
"18th May, 1847.

"Sir,—It would be very desirable to have two or three classes of diets in the Lunatic and Leper Hospitals to regulate expenses and to guide the purveyor in the quantities.

"I have the honour to request you will be pleased to let me know what you would recommend for two classes of diets consisting of three meals suited to the wishes and ailments of those under your care.

"Pray be moderate and simple in the articles for ordinary diet, and for sago or fever-diet what may be proper—

"That I may endeavour to establish some system of maintenance as soon as convenient. "I have, &c.

(Signed) "S. C. Roe, M.D.,
"P. C. M. O.

"Dr. J. G. Davey,
"Supt. of Lunatic and Leper Hospital."

Mem.—The above is a literal, a bona fide copy of the original: the

From our first arrival in the Colony, we were strongly impressed with the objectional system then

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arrangement of the sentences, the punctuation, &c., have been carefully preserved.

"Hendelle, 26th May, 1847.

"Sir,—I have the honour to acknowledge the receipt of your letter of the 18th instant, which refers to the dietary of the insane and leper patients under my charge.

"In accordance with your request, I have herein drawn up for your consideration '*two classes of diet, consisting of three meals,*' exclusively of a '*fever or low diet.*'

"As you will perceive, I have provided for some *variety* in the articles of food for both '*classes of diet*'—that *European* and that *Native*—with the conviction of its importance physiologically and pathologically considered; and in order not to exceed the present current expenses of the establishment at Hendelle, as well as to provide yet further variety of food, I have suggested for Friday's diet the substitution of pea-soup, with potatoes, &c., for meat of any kind; however, should it be considered impracticable in this Colony to allow such, the dietary for Friday may be of the same kind as that for Thursday (*mutton*) or Saturday (*beef*), as you may deem the more preferable.

"The better dietary submitted to you for the use of those of European extraction, as contrasted with that proposed for the native people, is in strict accordance with the principle hitherto exemplified in the comparative pecuniary allowances made to the Europeans and natives respectively; and what is more, is, in my opinion, in every way compatible with the difference of constitutional power which characterises the two races of mankind.

"As I learn from Appendix XVIII to 'Regulations of Army Hospitals,' so I would recommend the adoption of the same plan at Hendelle; viz. 'the meat to be *boiled*, so as to make a pint of good broth for the dinner of each patient.' An extra dietary may be and I think is necessary, to meet peculiar circumstances.

"I have, &c.

(Signed) "J. G. Davey, M.D.

"Dr. Roe,
"P. C. M. O."

in use at the Lunatie Hospital at Hendelle, as regards the victualling of the patients. Too mueh was left to the individual in eharge, and the opportunity to eurtail the diet of the lunaties and lepers

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No. 1, (European) Ordinary Diet.

Meal	Day	Diet
Breakfast		Coffee, 1 oz.; bread, 6 oz.; sugar 1 oz.; and two eggs (daily).
Dinner...	Monday	Beef, 6 oz. (with bone and undressed); Riee, $\frac{1}{2}$ measure; Salt, $\frac{1}{4}$ oz.; Vegetables and curry stuff, *ad libitum.*
	Tuesday	The same as Monday, omitting the beef, and substituting *fish.*
	Wednesday Thursday ...	The same, *mutton* instead of *fish.*
	Friday	Pea-soup, 1 pint; Potatoes, 6 oz.; Rice, $\frac{1}{4}$ measure; Salt, $\frac{1}{4}$ oz.; Curry stuff and small vegetables, *ad lib.*
	Saturday ... Sunday......	The same as Monday.
Supper		The same as dinner.

No. 2, (Native) Ordinary Diet.

Meal	Day	Diet
Breakfast...		Coffee, 1 oz.; jaggery, 1 oz.; and 3 hoppers daily.
Dinner...	Monday	Beef, 5 oz. (with bone and undressed); Riee, $\frac{1}{3}$ of a measure; Salt, $\frac{1}{4}$ oz; Vegetables and curry stuff, *ad libitum.*
	Tuesday	The same as Monday, omitting the *beef,* and substituting *fish.*
	Wednesday Thursday ...	The same, *mutton* instead of *fish.*
	Friday	Pea-soup, 1 pint; Potatoes, 6 oz.; Riee, $\frac{1}{4}$ measure; Salt, $\frac{1}{4}$ oz.; Curry stuff and small vegetables, *ad lib.*
	Saturday ... Sunday......	The same as Monday.
Supper		The same as dinner.

[No. 3,

with impunity too great; in fact, to invest any one individual with the two-fold capacity of *contractor* and *steward,* is to put the well-being of the inmates of any public building in jeopardy, and to hazard not a little the honesty of him most concerned. It was always our intention on the removal of the patients to the new hospital at Marandahn, to recommend the adoption of another system, one not open to the above objections; and had we supposed the plan we have so long had in contemplation in any way practicable at Hendelle, we should not have deferred its recommendation even until then. However, in so far as the

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No. 3, Fever or Low Diet.

Breakfast... Rice gruel, 1 pint; jaggery or sugar, 1 oz.
Dinner...... Sago, 2 oz.; sugar, 1 oz.; and bread, 4 oz.
Supper...... The same as dinner.

Mem.—The vegetables, it is seen above, are recommended to be used *ad libitum;* at Hanwell and Nottingham the weekly allowance of vegetables, including potatoes, beans, &c., amounts to about three pounds; and at Lancaster, to so much as twelve pounds: of this quantity, the potato is the chief ingredient.

"Principal Civil Medical Officer's Office, Colombo;
26th May, 1847.

"Sir,—In acknowledging your communication of the 26th, I have the honour to inform you that in arranging the diet of the Lunatic and Leper Asylum for the consideration of Government, all due attention shall be paid to your judicious suggestions.

"I have the honour to be, Sir,
"Your most obedient servant,
(Signed) "S. C. Roe, M.D.,
"P. C. M. O.
"Dr. J. G. Davey,
"Supt. of Lunatic and Leper Hospitals."

The subjoined dietary was that one adopted:— ["For

dieting of the insane under our care is concerned, we have been in no slight degree anticipated by the arrangements suggested and carried into effect by the Principal Civil Medical Officer; and which, we are glad

"For European Diets in the Leper and Lunatic Hospital.

Articles composing the different diets for a day.

Every bushel of rice contains 32 quarts.

ORDINARY DIET.	SPOON DIET.
12 oz. bread.	8 oz. bread.
12 oz. meat.	4 oz. sago.
1 oz. sugar.	3 oz. sugar.
½ oz. coffee.	2 oz. rice.
½ oz. salt.	2 eggs.
½*d.* curry stuff.	½ pint milk.
2 oz. rice.	

3 lbs. dry wood for each diet.
1 gill oil for every lamp.

MEAL.	ORDINARY.	SPOON DIET.
Breakfast .	4 oz. bread. 1 oz. sugar. ½ oz. coffee.	2 oz. rice } for 1 pint of 1 oz. sugar } rice gruel, or ½ oz. coffee, 1 oz. sugar.
Dinner .	6 oz. meat or fish. 4 oz. bread. ¼ oz. salt. ¼*d.* curry stuff. 2 oz. rice.	2 oz. sago. 1 oz. sugar. 4 oz. bread. 2 eggs. ½ pint milk.
Supper .	6 oz. meat or fish. 4 oz. bread. ¼ oz. salt. ¼*d.* curry stuff.	2 oz. sago. 1 oz sugar. 4 oz. bread.

1*d.* for each diet will be allowed for fish on days when meat is not issued.

(Signed) "S. C. Roe, M.D.,
"P. C. M. O.

"Principal Civil Medical Officer's Office,
"Colombo; 26th May, 1847."

["For

to confess, are much preferable to those previously in operation. Without, however, intending to detract in the slightest degree from Dr. Roe's exertions in the good cause, we would here beg leave to suggest, in *strict accordance with our original views on the subject,*

"FOR NATIVE DIETS IN THE LEPER AND LUNATIC HOSPITAL.

Articles composing the different diets for a day.

Every bushel of rice contains 32 quarts.

ORDINARY DIET.	SPOON DIET.
$\frac{1}{2}$ oz. coffee. $\frac{1}{2}$ oz. sugar. 2 hoppers. $1\frac{1}{2}$ pint rice. 8 oz. meat or fish. $\frac{1}{2}$ oz. salt. $\frac{1}{4}$*d.* for curry stuff.	4 oz. sago. $2\frac{1}{2}$ oz. sugar. 8 oz. bread. 2 oz. rice. $\frac{1}{2}$ pint milk.

3 lbs. dry wood for each diet.
1 gill oil for every lamp.

MEAL.	ORDINARY.	SPOON DIET.
Breakfast .	$\frac{1}{2}$ oz. coffee. $\frac{1}{2}$ oz. sugar. 2 hoppers.	2 oz. rice. $\frac{1}{4}$ oz. sugar. $\frac{1}{2}$ pint milk, or coffee and sugar.
Dinner .	$\frac{3}{4}$ pint rice. 4 oz. meat or fish. $\frac{1}{4}$ oz. salt. $\frac{1}{8}$*d.* curry stuff.	2 oz. sago. 1 oz sugar. 4 oz. bread.
Supper .	$\frac{3}{4}$ pint rice. 4 oz. meat or fish. $\frac{1}{4}$ oz. salt. $\frac{1}{8}$*d.* curry stuff.	2 oz. sago. 1 oz. sugar. 4 oz. bread.

1*d.* for each diet will be allowed for fish on days when meat is not issued.

(Signed) "S. C. ROE, M.D.
"P. C. M. O.

"Principal Civil Medical Officer's Office,
"Colombo; 26th May, 1847."

that the provisions allowed to the insane be received, not from the Commissariat department, but *directly* from the contractor; in other words, that the Lunatic Hospital be put on a precisely similar footing, as concerns the victualling of its inmates, as the Jails at Marandahn and Hulfsdorp. The plan here recommended would be found more economical and therefore more advantageous to the patients; for our own part, we can see no reason why the Lunatic Hospital should be put on a similar footing to the military establishments in Colombo, and especially so when it is attended with so much extra trouble and with so many additional claims on the services of the domestics belonging to the establishment.

The greater security of the new building will, we hope, protect the patients from all similar acts of violence to that registered in the table of mortality. The female patient, the perpetrator of the dread act which added one to the number of deaths in the past year, is now made to occupy a single room as a sleeping apartment, wherein of course she is in no position to offer violence to the unoffending. This single case demonstrates the importance of the construction of a Lunatic Hospital, and the indispensability of adapting it to the peculiar requirements of the insane. The provision of single rooms is always important, and no institution for insane persons can be complete without them. The erection of a lunatic hospital is a very different thing to that of any other

building; its architect requires to be informed of the principles of the non-restraint plan of treatment. If he would succeed in his labours he must borrow the aid of the physician accustomed to the care of the lunatic; for what may appear a very small matter with persons ignorant of or unused to the modern management of the insane, might prove a serious obstruction to the humane system, which, it is needless to add, takes no cognisance of chains and manacles; and the truth of the above remark we have ourselves experienced in Ceylon.*

* As an illustration of the truth of this remark, I may mention that on one occasion of visiting the Lunatic Hospital, when in course of erection, I discovered many of the doors of the sleeping apartments to have been pierced with a number of circular apertures, each one about an inch and a half in diameter—the whole forming a good-sized square. On inquiry I learnt, to my astonishment, that the *Principal Civil Medical Officer* had so directed the Civil Engineer. I lost no time in explaining to the latter gentleman how the first principles of the humane or non-restraint plan of treating the insane had been broken through by this one act. Of course, no visitor to the Hospital will, after this explanation, venture to hold me responsible for the existence of doors so specially adapted to encourage and facilitate the suicidal propensity of the melancholic and desponding, or the destructive tendency of the phonomaniac. These doors, in themselves, speak volumes: they are satisfactory evidence of the false position in which I have been placed in Ceylon, and of the mistaken opposition offered to my views and advice. And not less does their existence demonstrate the utter ignorance of the present head of the medical department in Ceylon concerning the necessary construction of asylums for the insane, and the modern treatment of cerebral disorders.

It is fairly to be inferred that when the Legislative Council in 1843 and 1844 called on Lord Stanley to appoint a *Super-*

We may here add, the occupation of the new building at Marandahn has already tended to realize our

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intendent of the Insane, and deferred the building of the Lunatic Hospital until the arrival of such a person in the Colony, neither it nor he anticipated so indiscreet and ill-judged an interference from the Principal Civil Medical Officer; nor would such, nor anything like it, have ever occurred had it not been for the more than perfect indifference of the said Council concerning such *Superintendent of Insane*, and the patients in his charge; or, in other words, had it not been for the strong contrast furnished in their earnest recommendation to Lord Stanley to send out a person to take charge of the insane, and their subsequent desire to cancel the act, and render his appointment of no avail; but it is with no slight satisfaction I am enabled to add, that in spite of the unceasing opposition which I have met with in high quarters, and particularly from the Army Medical department, I have succeeded in realizing the anticipation of even the Legislative Council, or, more properly, of its committee,—for the comfort and well-being of the lunatic have been ostensibly promoted, the mortality has been on the whole much reduced, and the number of *cures* greatly increased.

The strictures which have emanated from the Military and Colonial Medical department, on the construction of the Lunatic Hospital, are quite in character with the alteration of the said doors; however, I doubt not, the efforts of no class of men will persuade the intelligent and unprejudiced in Ceylon to believe that the senses of a faithful and vigilant attendant are not admirable substitutes for ponderous and blank walls, chevaux-de-frise, and broken glass. If insane patients will attempt to escape from the confinement imposed upon them, why not employ those means of prevention most compatible with a gentle and humane nature, most consonant with reason, and the farthest removed from a physical and brute force or compulsion.

Unremitting has been the hostility expressed to the open fence-work about the *airing-courts*, because, although lofty, the patients can climb over it, "*when there is no servant near to prevent them.*" True; but such a circumstance should never happen. I have the

many anticipations, and to assure us how much success may be expected to attend a course of judicious exertions, when directed to the amelioration of the insane

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pleasure to quote the following sentence from the 'Report of the Metropolitan Commissioners in Lunacy.'

"*The yards of asylums should be constructed so as to have as much light, sun, and prospect as possible.* With this view there were raised in the yards of the asylum at Wakefield (erected in 1815) *mounds affording a view of the country over the walls.* Similar but more perfect arrangements have been made since at the *Surrey*, Lancaster, and other asylums. The yards, however, at Bodmin, Nottingham, and Leicester are for the most part dull and gloomy, from being surrounded by high walls. Many of the yards at Hanwell are inclosed by walls and buildings, and some are placed between the main building, the farm-yard, and piggeries. The yards in the asylum for the county of Norfolk are extremely defective; and those in the asylums for the counties of Dorset and Kent are not cheerful or well laid out. Every yard ought to contain a shed for shelter from the sun."—(See my correspondence with the Colonial Secretary.

I think the Commissioners would readily approve of the yards at Marandahn. To coop the insane within an inclosure of bricks and mortar, away from every agreeable excitant, and to deny them the many simple sources of mental relaxation, so much needed by the disordered mind, would be a cruelty hardly second to that of the Inquisition or the Bastile.

In the absence of a correct *principle*, how strange, incoherent, and illogical does our conduct become. Some six or eight months after great and severe objection had been offered to the new Asylum, on the score of extravagance and such like, Dr. Roe is found urging the erection of verandahs about the premises; of workshops, and of residences for the native servants and their families!!! The first-named are not needed, because of the great breadth and size of the galleries; the second would be useless, because there is no systematic employment found for the insane; and the bare idea of the third is utterly inexcusable.

native of Ceylon. As may be expected, the advantages which its construction embraces over Hendelle are manifold. The general arrangement of the wards and galleries is such as to allow the necessary classification of the patients; a point of very great importance. The hospital itself, in so far as the details are concerned, we hope, might one day constitute a respectable rival to even the European Asylum; but if ever it take such a stand, whatever interest may be taken in it at this time must not flag. That which now presents we are encouraged to look on as the nucleus only of what is to be; much remains to be done. In the first place, we should like to see the space on which the building stands properly inclosed by a neat fence-work; and, what is a very material point, the whole of the jungle and useless cinnamon bushes removed, rooted up, and destroyed, and the ground now so uselessly, even injuriously occupied, nicely cleared and put in order; the many holes filled up with earth, and drains cut wherever necessary. The premises, now so obstructed and encumbered, might very properly present a series of fine, broad, gravelled walks, so arranged as not only to please the eye, but to inclose certain portions of ground, which, on being well planted with cocoa-nut, jack fruit, &c., might be made to furnish both food and labour to the patients. The addition of trees having a wide-spreading foliage, such as the bamboo, almond, cotton, &c., would provide shade and shelter

from the sun and rain. With some care and management, it would be easy to raise vegetables for the use of the patients. A portion of that ground behind the building, to the east, may be used for the purpose of a kitchen-garden; spinach, beans, cucumber, melon, yam, pumpkin, and brinjall might then be found for the patients, and the occupation which their supply would ensure would prove a great desideratum. As regards the building itself, so far as it has been proceeded with, we cannot discover reason to recommend either alteration or addition, at this time and under present circumstances; probably if the roofing of the wards, towards the east, were carried two, or three, or four feet lower it would be well. The early morning sun finds ingress to the galleries, and renders them warmer than they otherwise would be, but I am not aware that the patients dislike this; they may commonly be seen squatting down in the airing-court in the morning, preferring the sunshine to the shade, a circumstance to be accounted for probably by the diminished animal heat which so commonly accompanies mental diseases. The great size and breadth of the galleries attached to the sleeping apartments may very properly be thought to supersede the necessity of any sun-screens in the airing-court; however, there could be no objection to plant a few trees in them, as we have before recommended.

In the second place, we would venture to hope

what we now strongly recommend, that additional wards might erelong be added to the present building, in order that the insane about the island, now so miserably accommodated in the jails, might be removed thereto. We would earnestly impress on the attention of the local Government of the colony, that a large number of lunatics are at this moment immured within the walls of the prisons of Jaffna, Trincomalee, Point de Galle, Kandy, &c., where, subject to the unwholesome discipline and cruel restraints of the criminal with whom they are in contact, all and every prospect both of relief and cure is denied them; and where, therefore, their only chance of escape from the miseries which afflict them is in death; and we would take this opportunity to add, that even at Colombo the removal of the insane from the jails is not always attended to as it should be. In our former Report we have alluded to the detention of lunatics in the custody of the *Fiscal*, and, impressed as we are with its injustice and impropriety, we would take the liberty again to recommend, that the insane may be at all times, and without any loss of time, sent to the Lunatic Hospital.

Contrary to the opinion expressed by some persons, we feel convinced that the Government of this colony (Ceylon) would benefit, and perhaps materially, by extending yet more than it has done its care and protection of the insane poor. As an apt illustration of this position we would refer to the

criminal lunatic now at Hulfsdorp, in the keeping of the Fiscal. From the history of this man, it would appear he had been more or less insane a long time, perhaps years, before the occurrence of the *murder* for which he was tried at the Supreme Court, in the past year, 1847, and not only found *guilty*, but condemned to suffer death; and there can be no doubt, that had it not been for the prudent and humane interference of Mr. Prins, the medical attendant at the jail, the sentence of the court would have been carried into effect. So foul a stain on the legal profession of the island as the execution of this man would have been, has, however, been averted, and happily so. As the correspondence in possession of the Government explains the person here mentioned suffered from periodical insanity, the paroxysms of which occurred after slight causes, and were marked by instinctive acts of violence. The evidence of Dr. Conolly, given at the Central Criminal Court, at London, in October last (1847), in the case of John Ovenston, charged with the attempted murder of George Crawley, proves the *irresponsibility* of him liable to recurrent mania; the absolute nature of which (pathologically considered) has not been until lately well and properly understood, and therefore must the conduct of the British legislature, in so far as the law of lunacy is concerned, be accounted for; we allude here to the *"Questions"* and *"Answers"* exchanged, some four years since, between the

"Peers" and "Judges."* The above case moreover most satisfactorily shows the necessity of not allowing insane persons to remain at home with their friends—to live at large, uncared for and unheeded. So long as society remains *so* unprotected from the impulses of the lunatic, so long must we expect to be shocked with the recital of acts of violence and bloodshed by the irresponsible, and to have from time to time to mourn the untimely death of our fellow-men by the hands of the lunatic. Presuming on the curability of the person here mentioned, originally, his early admission into a lunatic hospital, and the treatment there found for him, would have sufficed, after a few months, for his recovery; whereas now, the neglect or improper native treatment of which he was made the subject, on the occurrence of mental disease, has not only had the effect, now that he is incurable, of rendering him a continued burthen on the Government, but what is more, it has the one or the other, by taking up the time and attention of the Supreme Court, including its paraphernalia of officers, &c., led to very considerable expenses; which, had they been diverted into other channels, might have been productive of much good.

We should here take leave to observe, that when *insanity* attacks the European at Ceylon, we are much

* See the London daily 'Times' for July 1843, and my paper "*On Criminal Insanity*," being an analysis of the said "*Questions*" and "*Answers*." It is published in vol. i of the Zoist.

inclined to think that, *as a general rule*, it is better he should be sent home with as little delay as possible. The present limited remedial resources at the Lunatic Hospital, the general inefficiency of the native attendants, and particularly the absence of all necessary and salutary mental or moral influences or impressions to be derived from those attached to a similar institution at home, when considered in connexion with the disadvantages offered here by a tropical climate, necessarily incline one to believe that the chances of recovery would be, more frequently than otherwise, much increased by a removal which may enable the individual affected to escape these several objections we have named; and if so, it must follow that the Government would, as a rule, best consult its own pecuniary interests, by preferring to send the European lunatic to his native country, rather than run the risk of incurring his support for the full period of life,—a circumstance to be anticipated should the mental disease prove irremediable, and which, as we have shown, is at the present not unlikely to occur: on the above principle it is we have acted, in the few instances which have been already brought to our attention.

On the removal of the insane from Hendelle, they complained much of the want of the ordinary masticatories in use by the native population; when there, the insane partook of the betel, &c., allowed to the lepers; but at the new hospital they could of

course no longer do so. Though perfectly assured of the disgusting nature of this habit of chewing among the dark races of mankind, and disposed at all times to view the use of the betel, as every person of right mind must that of the tobacco plant, as a practice at once dirty and offensive, yet do we feel convinced, that both the chewing of the one, and the smoking of the other, may be at certain times, and particularly among the inmates of the lunatic hospital, resorted to with the greatest advantage. The life of the lunatic is one so truly artificial, so devoid of all the ordinary motives to action and thought, so alien to the very nature of man, that his inclinations and desires can hardly be expected to be less depraved than they were during his *sanity;* the absorption of his various feelings and sensations in the delusions which so disturb and harass him, cause him to seek in old habits and indulgences that relief elsewhere denied him; and hence is it, that the native insane crave after the nauseous masticatories they have been taught from their early childhood to regard as a luxury at once the most exquisite and refined; and hence is it, *also,* that the European, accustomed to smoking, when suffering from cerebral disease, finds his cigar so certain a sedative, so gratifying an indulgence, that to attempt its disuse would, in many instances, we feel positive, be attended with the worst consequences. To withhold the use of tobacco from the lunatic,

both native and European, if he has long been used to its indulgence, depraved though it be, would be to expose him to the risk of increased and protracted mental suffering, and thereby probably convert a disease once curable into another incurable, or substitute an organic and permanent affection of the brain for one only functional and temporary. The indispensability of malt and spirituous liquors in the treatment of diseases and injuries occurring to those long accustomed to their *abuse* is well known, and the fact admits of a very similar explanation to that above made. In reference to the insane, we would beg to repeat our recommendation that an allowance of *betel*, &c., and cigars be made for the use of the patients under our care.*

Without dwelling on the various items contained in our previous Report for 1847, we would again recall the attention of the Government to the want of some SYSTEMATIC *employment* for the insane at the new hospital. In its absence, as much occupation has been sought and provided for them as the present circumstances admit. The patients have helped to

* Cigars and tobacco were purchased by the Medical Assistant for the patients at Hendelle, with the allowances then and there made.

It is now about a year since the above was written, and the insane are still without the indulgence required for them; however, the *betel* and *areka-nut* are at this time planted on the premises at the new Lunatic Asylum, and are looking well, so that in due time the patients might expect to be gratified with their use.

clear the grounds of the jungle and rank vegetation which so plentifully abounds; and they are many of them daily engaged as helpers to the servants in the establishment. The female patients afford no inconsiderable assistance in the repair of the apparel, &c. We are not unfrequently *solicited* for needlework. Among the women there are a few who take much delight in the manufacture of small articles of matting; of the male patients, not only do some show great aptitude for domestic occupation, but what is more, two or three of them have proved themselves very useful *artisans*. The erection of certain sheds, &c., about the premises, and the manufacture of several excellent pieces of furniture, the property of Mr. Ebert, the medical sub-assistant, attest their general capabilities for useful employment; however, we do not think it at all necessary *at this time* to advise the erection of *workshops*. If a systematic employment of the patients were to be commenced directly, it could most easily be carried into effect *now* without *workshops*; the spaciousness of the galleries is such as to afford every facility needed. We have before, in our correspondence with the Colonial Secretary, recommended them as a necessary adjunct to a well-regulated hospital; but ere such are proceeded with or contemplated, we feel anxious about the additional wards for the reception of the insane from the various jails at out-stations—a subject already mentioned in this *Report*.

Before concluding these our remarks, we would acknowledge the kind co-operation of the Principal Civil Medical Officer, Dr. Roe, in granting the allowance we had the honour to recommend to discharged patients on leaving the hospital, and recommencing their intercourse with the world; that such an arrangement has contributed materially to the well-being of the individuals for whose benefit it is intended, there is every reason to believe; the result, so far as it is possible* to learn, has realized our brightest anticipations.

* I have here fallen into an error: the relief of discharged patients is provided for in the colonial ordinance relating to insane persons. Vide Ordinance, No. 2, 1840, section No. 5.

The Third Report of James George Davey, M.D., *Superintendent of the Government Lunatic Hospital at Colombo, Ceylon.**

In presenting this our Third Annual Report to the local Government of the colony, it is with no trifling satisfaction we record the increased and increasing interest taken by the public in and about Colombo in the cause of the insane. There is good reason to believe that the Lunatic Hospital, and all that may relate to it, is beginning now to find favour in the eyes of many persons, and even of some of those who did allow themselves to be led into erroneous and false conclusions, on the authority of individuals who preferred, for what reasons they know best, to misrepresent, and assert rather what they wished than *knew* to be the fact. Opposition is

* The following Report contains certain remarks, notes, &c., which, from their peculiar and local character, were not copied into that one forwarded to the local Government of Ceylon. At the time it (the Report) was composed, there was every probability of my leaving Ceylon forthwith; but when doubts began to be entertained whether or not my own appointment would be included in the coming reductions in the Government service of the colony, and the commencement of another year rendered the presentation of the annual Report indispensable, common prudence, if not expediency, prompted me *then* to omit those passages, the insertion of which, under other circumstances, *only* may have been beneficial. Their publication *here* and *now* I regard a public duty.

the handmaid of advancement; prejudice and ignorance are ever on the alert to avert the aim of the philanthropist, and neutralise the exertions of science; but the issue is not a whit less secure, though perhaps somewhat retarded. The call of visitors to the Lunatic Hospital is now becoming frequent, and we trust that such may be rightly taken as an evidence that, *whatever might transpire,* the insane at COLOMBO are secure against a repetition of the cruelties and neglect which were once their unhappy lot to endure. Not only are the *site* and *construction* of the new Lunatic Hospital losing the false nature given to them, but what is more, the native lunatic is, at length, admitted *not* to be without the pale of our protection and care.

It has been objected by some parties at Ceylon, that the insane among the dark races of man are not within reach of the same means of cure as the European; that they are not susceptible of the various mental and moral influences necessary to the relief and cure of disorders of the mind: this is a great mistake. Any one who has made the physiology of man his study, who has thoroughly investigated the varieties of the human species and their cerebral organization, and has learned to compare the general size and form of the cranium in each variety, viz. the Caucasian, Mongolian, Ethiopian, American, and Malay, not only with each other, but with the intellectual, moral, and animal natures peculiar to

either one, *he* will, of course, directly perceive that, whilst the first named, viz. the *Caucasian*, is the most likely when suffering from insanity to be benefited by mental and moral means of cure, the most easily influenced in his conduct and speech by stimuli offered to the higher sentiments and feelings,—yet that the other varieties, viz. the Mongolian, Ethiopian, American, and Malay, although less susceptible than the Caucasian to the impulses of a generous and exalted nature, and less likely to be controlled, and his diseased volition kept in subjection by the affections and reason, are nevertheless by no means wholly uninfluenced by the like remedies. Insanity exhibits the same protean forms and modifications among the dark as among the white population. The European and the Asiatic are alike subject to precisely similar and anomalous symptoms of cerebral disease, and in both they are modified equally by the original configuration of the brain and the *causes* of diseased action in it; and hence must it follow, that the same *principle* of treatment must obtain in both the white and dark races of mankind.

We trust these few words will be found a sufficient reply to the objection taken, and be received as a guarantee of the sure and certain claim of the native insane on the care, sympathy, and protection of the more fortunate and gifted among the genus *homo*. The following highly appropriate remarks are taken from a letter, dated July 30, 1847, addressed to

the Honorable the Colonial Secretary, Sir J. E. Tennent:—"Until I am assured that Ceylon is required to make an exception to a general rule, and reject alike the improvements of science and the progress of sound views of humanity, then, and not till then, can I suppose that the insane of this colony should *not* partake of the benefits awarded by philanthropy and learning."

* * * *

"There are in Ceylon large sums of money annually expended on native education, on religious conversion and sectarianism; and although none other than the most bigoted or ill-informed would venture to affirm that the efforts now being made to instruct and Christianise the Ceylonese *can* raise them to an EQUAL height with the European, in so far as intellect and the higher feelings of humanity are concerned, yet I apprehend no *one* person will be found disposed to object to the means employed for the advancement of the dark population here or elsewhere. *Apropos*, the poor lunatic is not less a legitimate object of our concern than is the *sane* portion of the community—far otherwise."

That numerous persons in the colony will differ from us in this opinion we are well aware, but we have yet to learn that *the colour of the skin* can exempt any party from the rights of humanity; or that because an insane man is a "*nigger*" he is to be left to perish unheeded and alone; or that, although

the bench and the bar may entertain partial and incorrect views of mental disorders and the requirements of the lunatic in Ceylon, there is no necessity for a judicious superintendence of the insane.

At the present time it is well known, there is no residence for the *Medical Superintendent* at the new Lunatic Hospital. An experience extending over a period of thirteen or fourteen months, convinces us how necessary it is that this officer should live *on the premises.* It is true that there *are* Medical Sub-assistants in and about Colombo who may be found *trustworthy* and *highly useful,* and in whom *confidence* may be reposed. It is true, we believe, that there are gentlemen in the Colonial Medical Service possessing *a moral fitness* for the duties of the office now held by a *son* of the senior clerk of the Principal Civil Medical Officer's office, but in the absence of a person possessing the above requisites, we would earnestly entreat of the Government to appoint a *European* as the resident medical officer.* These remarks are dictated by a sense of public duty, to which every kind of moral sacrifice should be made; in the present instance we have acted on this *principle.*

We have adverted to this subject in the letter above quoted, addressed to the Honorable the Colonial Secretary, in these words: "The Superintendent of

* See a letter addressed by me to the Principal Civil Medical Officer, dated October 1847, and the reply thereto, for my justification of this advice, and of its serious importance.

the Lunatic Hospital should by all means reside on the premises, else he can be of little real service to his patients. Everything, however trivial, is at every hour either remedial or otherwise. Every mental impression received by the lunatic is for good or for evil. Each recurring sensation and thought adds to or detracts from the chances of cure. Every impulsion of the cerebral fibres is associated either with enjoyment or suffering; and each one of these phenomena is the effect oftentimes of circumstances apparently so trivial, that to one unaccustomed to the insane they are more than likely to be passed over in silence and neglect; and hence the necessity of a constant and increasing vigilance on the part of the physician concerned in the treatment of mental diseases, and hence also the incompatibility of the *daily* visits made to ordinary hospitals with the requirements of the insane."

Among the many difficulties (artificial and natural) which we have experienced in Ceylon, has been that one belonging to the native languages. Not being able to hold any *direct* communication with our patients, and therefore compelled to rely on the intervention of an interpreter, we may have failed, and do probably from time to time, to make out so accurately as we could wish, the several indications of mental disorder or recovery, as the case may be; in fact, so great did this difficulty once appear to us, that we took an opportunity to notice

it in a certificate of the health of a patient we wished to be discharged.*

* The annexed correspondence owes its origin to the fact here recorded:

"Principal Civil Medical Officer's Office,
"Colombo, 22d October, 1845.

"SIR,—With reference to your certificate of the 4th instant, I have the honour to acquaint you, that instructions have been received from Government, to call upon you to state how you are able to certify that the party there mentioned is quite recovered, if you have been 'without one fair opportunity of judging of his mental health.' I have the honour to be, Sir, your most obedient servant, (Signed) "C. ST. JOHN, M.D.,
"P. C. M. O.

"Dr. Davey,
"Supt. of Lunatic and Leper Hospital, Hendelle."

"SIR,—In answer to yours of the 22d date, wherein I am called on to explain how I am able to certify that the party alluded to is quite recovered, 'if I have been without one fair opportunity of judging of his mental health,' I have the honour to reply, that from the manner in which my words are arranged in your letter, I am induced to believe that my meaning has not been properly conveyed.

"I wished, then, to certify, that Badage Juanis was and is *quite recovered;* but that my ignorance of his language deprived me of *that one* fair opportunity of judging of his mental health. Of course his demeanour, appearance, and general conduct, &c., constitute my exclusive opportunities of coming to a conclusion concerning his sanity. I find that I can place but little reliance on the aid of the interpreter. "I have, &c.
(Signed) "J. G. DAVEY."

"CELSUS" and other anonymous scribblers in the 'Ceylon Times,' who have access to the records of the Medical Office, and who enjoy the patronage of the head of the medical department, as a return for the bad use they make of the official intelligence therein gleaned, are not ignorant of the existence of the above letters, so at least it would appear, from their late hostilities; but lest they should be, I have here introduced them.

Inasmuch as from the first few weeks of our arrival in Ceylon to the present time we have been led to anticipate that our appointment was most insecure and uncertain, we have not had a sufficiently strong inducement held out to *formally* learn the native languages; but there can be no doubt of the immense necessity which exists for *every medical man* practising among the dark races in Ceylon to learn at least the Cingalese and Malabar tongues.*

* This "difficulty," like every other, becomes so much modified by experience, that one hardly feels it in his intercourse with the sick native. Upon the same principle that those practitioners in the constant habit of treating the numerous and peculiar affections of *infants* and *children* come to possess the requisite facilities in making out their diseases, and the peculiar management each may require, so have I learned to form my diagnoses, and to make choice of my remedies in cases of insanity occurring among the dark races. Those anonymous scribblers in the 'Ceylon Times,' who have thought to diminish the apparent value of my services in the colony, in so far as the cause of the lunatic is concerned, have forgotten, in their remarks on my inability to hold personal converse with the insane, that not only does the same objection apply to the medical officer having the care of other patients than those suffering from mental disease, but inasmuch as the lunatic is *not* very likely to give his medical attendant a particularly sane account of his malady, its origin, progress, and symptoms, the advantage gained by "personal converse" with the latter named is, to say the best of it, not a little *ambiguous;* and upon this ground it is I have, above and on a previous occasion, alluded to the difficulties in my way when forming an opinion concerning the *convalescence* of inmates of the Lunatic Hospital. I write from no limited experience when I affirm, that I feel much more dependent on an interpreter when prescribing for the *sane* than for the *insane.* Among the native population, what the former says it generally matters little, but far otherwise with the latter—the Colombo Dispensary and the Lunatic Hospital to boot.

Spurzheim, in his 'Principles of Education,' has this sentence: "It has been reported that there are nations without religious feelings; but more exact investigation has shown, that religious ceremonics existed, but had been mistaken for mere social amusement, such as dancing, singing, and fighting." And it must never be forgotten that the superstitious observances and beliefs among the dark population of India may be mistaken for *indications of mental disorder.* In investigating a case of doubtful insanity in the person of a Cingalese, about a year since, we were nearly falling into an error of this kind. This man had murdered the daughter of a neighbour of his; the parties by accident met in a jungle-path close to the village; there and then the poor girl met her death. Afterwards he excused the commission of the deed by declaring that the spirit of the gods had so commanded him *from out of the bowels of the deep earth.* Now when we first heard of this fact, we set it down as an *indication of insanity;* but afterwards learnt that the followers of *Gotamo* (the Buddhists) so explain all extraordinary and unpremeditated circumstances connected with their personal history and existence. We might very properly extend these observations, but it is better, perhaps, to pass on to other matters.

Apropos, the individual above referred to suggests the necessity of repeating here the advice contained in

a previous Report, viz. that all insane persons should be sent to the new Lunatic Hospital at Marandahn, in preference to the jails about Colombo. The fact of their detention at the jails would seem to bespeak a disposition somewhere to recur to the old order of things, as they existed up to our arrival in the colony. To confine the lunatics at a jail, under any circumstances, is to oppose the object and intention of the Government "ORDINANCE," designed *"to amend the law relative to the establishment of Lunatic Asylums, and to make further general provisions for the proper care and custody of insane persons."* In the said *ordinance* it is declared, that *"if there shall be no Lunatic Asylum within the district"* where *"insane paupers, or vagrants, or dangerous lunatics"* are found, *"then,"* and then only, shall such persons be *"committed to the Fiscal for safe custody,"* and only so *"until such person or persons can be transferred, under the warrant of the Governor, to the Lunatic Asylum on the first convenient opportunity."* In fact, the law as laid down in the said *"ordinance"* provides not only that the *"insane pauper vagrant"* and the *"dangerous lunatic"* shall be sent to the Lunatic Asylum, but moreover declares that all *"persons charged with crime, if insane, shall be sent to the Lunatic Hospital;"* and what is more, that *"prisoners under sentence in jail, on becoming insane, shall be removed to the Lunatic Asylum."* But in spite of

all this, and in direct opposition to the earnest recommendation of the committee appointed by the Legislative Council of the colony in 1843, and also to that of the Jail and Hospital Committee in 1844, to separate the lunatics from the prisoners, and to send no more insane to the jails; and in the very face of the able provisions of the ordinance, the local authorities will persist in lodging and detaining the lunatic at Hulfsdorp. At the moment we are writing there are many insane confined at this establishment; and the person above mentioned may be seen any day, working in the company of a gang of felons. We do not think this is what should be in an intertropical colony which boasts of British rule, and is made subject to the laws of Great Britain.

It may not be considered out of place here to protest against the admission of lunatic patients into the *Pauper Hospital*, for this institution is no better adapted for the accommodation of the insane than the Jails themselves and therefore is it open to very analogous objections. The Lunatic Hospital is *designed* for the accommodation of those labouring from disordered mind, it is alone adapted for the management of such patients; it only affords the means whereby it can be hoped to dispense with the use of MECHANICAL RESTRAINT, which, we need hardly add, is never necessary in the control of the lunatic, or in the treatment of insanity,—in an establishment well and properly constructed, and presided

over by an experienced physician and intelligent attendants.

We held the appointment of one of the Resident Medical Officers at the County Lunatie Hospital at Hanwell for nearly four years, which institution contains 1000 beds, and during the whole of that period, we may safely and truly venture to affirm, we never *once* witnessed so awful a picture of maniacal fury and rage as presented itself some few weeks since at the Pauper Hospital in the Pettah, Colombo. The poor fellow alluded to was attacked with "*acute insanity*," and instead of being sent to the *Lunatic Hospital*, was made an inmate of the pauper establishment named; and, in the absence of a properly-arranged apartment, wherein to seclude him until the paroxysm abated, he was closely packed in a thick and heavy strait-waistcoat, and then bound by numerous folds of sheeting to the bedstead on which he lay, and so was he left suffering and to suffer, both in mind and body. To witness a scene so distressing, so inhuman, and so foreign to the advanced state of science of this day, was to doubt almost the utility of those labours which are destined to immortalize the names of PINEL and CONOLLY. The violence of the cerebral faculties, luckily for this poor patient, became expended after some time, and he was then liberated from his thaldrom, but not without serious effects on his mental health.

No one accustomed to the humane and scientific

treatment of the insane, but knows that the employment of restraint and the recovery of the patient are incompatible the one with the other, and that the first thing to be done in the treatment of all mental disorders is to liberate the patient from every kind of physical distress and inconvenience of whatever kind. Exactly those means which will soothe, soften, and subdue the peevish and angry mind of the spoiled and irritable child, will *"soothe, soften, and subdue,"* or what is the same thing, will restore the necessary control and composure to the diseased volition or excited animalism of the maniac. What parent, then, we would ask, anxious for the well-being of its offspring, would provoke it, during passion, by additional sources of irritation, mental or corporeal? Let the physician take example from maternal instinct and avoid the employment of mechanical restraint in the management of the insane. There is a more complete parallel between these two cases than the superficial observer would imagine; for the maniacal paroxysm of the adult, like the peevishness or mental irritation of the child, is not unfrequently cut short and effectually arrested, even at its commencement, on the employment of a judicious and discriminating *moral regime*. It is the nature of *paroxysmal mania* to cease as suddenly as it commences. *Mania,* like *neuralgia, hysteria,* &c., may be of short duration, however severe; this form of disease is called by Dr. Prichard *ecstatic madness.*

Some few years sinec we witnessed a well-marked instance of this morbid affection of the brain, in which the attack lasted about *half an hour;* it was indieatcd by great and unceasing mental excitement and delirium, with much violence of conduct,—so much so, as to render the presence of several persons necessary. We feel quite positive that if this lady had been, during the paroxysm, wrapped in a strait-waistcoat and bound hand and foot to her bed or couch,—in a word, treated as the poor man was at the Pauper Hospital, not only would the paroxysm *not* have ceased *in half an hour,* as it did, but that a great risk would then have been incurred of inducing a continued if not an incurable mental disorder. How easy would it have been for the *Head of the Medical Department,* in Ceylon, to have obtained the Governor's warrant for the admission of Mr. M. to the Lunatic Hospital; and so, to say the least of it, have avoided an infringement of the "*ordinance*" above quoted.*

In our Report for 1847 we have mentioned the apparent necessity which exists, *generally,* for send-

* The gentleman mentioned in the text was kept at the Pauper Hospital by Dr. Roe's desire, and under *his* treatment, for about three weeks, during the greater part of whieh time he was in restraint; he was *then* sent to the Lunatie Hospital. On releasing him from the strait-waisteoat on admission, aud on examining his person, the saerum and elbows presented marks of uleeration, surrounded by a highly inflammatory state of the integuments. The wound on the saerum was of a large size, aud its centre oecupied by sloughing eellular tissue; faets these whieh plainly enough bespeak the amount of coercion practised. He was mueh emaeiated,

ing the European home when he is attacked here with mental disease; our reasons for entertaining this opinion are therein given, and to which we would beg

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and although highly excited and restless, the vital powers were much enfeebled. The evacuations were *not* unlike coal-tar.

The indications of treatment I conceived to be—

1st. To support the *vis vitæ.*

2d. To improve the morbid state of the alvine secretions.

3d. To diminish the nervous irritation or exalted action of the cerebro-spinal functions.

A generous and discriminating diet, calomel, with other purges, and the use of morphia, were the means employed. These, together with auxiliaries, as a kind attention and encouragement, a proper regard to cleanliness, and occasional seclusion, soon promised well. It is *now* about three weeks since his admission, and the marks of violence about the body are healed; he is considerably less emaciated; his excessive excitement and restlessness are now exchanged for a mere insane loquacity, and he sleeps well. The *vis vitæ* is daily gaining an accession of strength; and, what is a very material point, the excretions have become normal. His appetite is excellent; he eats heartily, and takes his bottle of good ale daily; in fact, Mr. M. is now sufficiently well to resume a decent and comfortable apparel; and to seek recreation and exercise in walking about the neighbourhood of the hospital. I am not without hope that, in spite of the valuable time lost, he might eventually recover.

Some time since I had a very similar case of acute cerebral disorder under my care; *it* terminated in a rapid and complete recovery; *but this patient was not subjected for three weeks to galling and cruel restraints.* The particulars of this highly interesting case are well known to Drs. Willisford and Scott, of Colombo, by whom my assistance was solicited.

Since writing the above, this gentleman (Mr. M.) has had a return of maniacal excitement, which continuing, had the effect of prostrating his vital powers to an alarming degree; and had it not been that his appetite remained excessively good, almost voracious, he must have died. In addition to the treatment

to refer. It is now about a year and a half since that our opinion was requested concerning one Robert Joachim. We strongly advised his removal

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before adopted, the scalp was shaved and well blistered; he was put under the influence of mercury, and the gums kept slightly sore for several days; and quinine was freely administered. Under this treatment he improved very much; in exact proportion as he gained flesh and his bodily health improved, so did the mental irritation diminish, and the propensity to tear and destroy his clothing, &c., cease; but to meet this difficulty Mr. M. was attired in a dress of such a material and so constructed, as successfully to resist all his endeavours to either tear or remove it from his person. Now this trifling resource of the non-restraint plan it was which completely puzzled *the restraint or physical force party* at Colombo, headed as it was by *the Government paper*, the print patronised by Messrs. Roe, Grant, and Company. The editor of the 'Ceylon Times,' or one of his military medical correspondents, so far prostituted the legitimate objects of a free press, as to recommend, in a carefully-worded editorial, that my patient should be kept out of his room (not secluded), and allowed to walk about the ward with a strait-waistcoat on him; and not only allowed, but encouraged his few readers to believe that this poor gentleman was kept in *solitary confinement*, than which nothing can be more untrue. The evening preceding the publication of the paper wherein the observations alluded to appeared, Mr. M. spent an hour or two in the family of the Medical Assistant resident on the premises, and not only behaved himself with propriety, but amused himself with the children, and offered them much kind attention. Mr. M. had been what Dr. Conolly has very properly called "spoiled," by the imposition of restraint at the Pauper Hospital, which rendered him less easily managed and controlled, and which also led to more frequent and longer continued *seclusion*, day by day, than would otherwise have been found necessary. If the *seclusion* of an insane patient in his room be but the abstraction of all external stimuli—the mere withdrawal of the excited and irritable mind from every source of thought, feeling, and action, than which nothing can so efficiently

to Europe. In our letter to the P. C. M. O. are these words: "If he be not sent home, not only

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restore composure to the oppressed and over-wrought brain—then surely is SECLUSION, *when practised with care and discrimination*, that is, when not abused, among the most important of remedial means in the treatment of mental disorders. To substitute the soothing effects of a temporary seclusion in a quiet and darkened apartment, away from noise and bustle of all kinds, by the annoyance, pain, and irritation ever experienced by the lunatic when made subject to any kind of mechanical restraint, would be of all things the most cruel and inhuman. If Mr. M. had been treated as the writer in the 'Ceylon Times' suggested—had his over-wrought and oppressed brain, already so morbidly susceptible to every kind of impression, been exposed to additional stimuli, and the physical discomfort of a strait-waistcoat superadded—what could be expected but an aggravation of all his sufferings and consequent *death*.

The philosophy of restraint in the treatment of insanity may be rightly summed up in these few words—they are from the pen of Mr. Dickens (Dombey and Son): "'You might keep me in a strait-waistcoat for six weeks,' said the faithful Susan Nipper, 'and when I got it off, I'd only be more aggravated.'" The present improved state of my patient is in itself a sufficient reply to my critics.

I beg the reader's attention to the following remarks from the able pen of Dr. Conolly. They embrace in every particular not only the *principles* of treatment so successfully pursued in the case here dwelt on, but also the important details connected with its progress.

Mr. M. ultimately recovered.

"*Seclusion.*—All the substitutes for restraint are, like restraint itself, liable to be abused; but none can be made such instruments of cruelty by abuse. All are also liable to great misrepresentation: and none more so than that which is of all the most useful, the most simple, and the most approved of by the highest medical authorities; namely, seclusion. By seclusion is

will he not recover, but it is more than likely he will become progressively worse, and ultimately *incurable;*

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meant, temporary protection of the maniac from the ordinary stimuli acting upon the senses in the refractory wards of a Lunatic Asylum. He is abstracted from noise; from the spectacle of a crowd of lunatics; from meeting those who are almost as violent as himself, and from every object likely to add to his irritation. But the mode in which seclusion is effected is also important to securing the benefits of it. If resorted to with violence, if accompanied with expressions of anger or contempt, if stigmatised as a punishment, and if followed by neglect, it may produce all the evil moral effects of restraint itself. If injudiciously persevered in in very recent cases, it exasperates instead of calming. The patient requires freedom of action; is relieved by strong muscular exercise; and this should be provided for by such a subdivision of airing-courts as would leave one for the occasional use of a single patient, at least for a few hours in the day. After being indulged in active voluntary exercise for an hour, two hours, *or such period as may seem desirable,* the patient should be secluded. Calmness and sleep will sometimes follow; or sufficient tranquillity to enable the attendants and officers to talk to the patients with effect.

"Under the system of restraints, when a patient became noisy and violent, and particularly when some mischief had been committed by him, it was considered necessary, and it was the usual practice, to overpower him, and to put him in some kind of strait-waistcoat. This was done with great difficulty, and with much danger to the attendants. Observation has convinced the Resident Physician that this was a useless, and even hurtful, mode of management. It was like endeavouring to smother a fierce fire by heaping very combustible materials upon it. A maniac in the midst of his paroxysms, like a man in a violent fit of passion, should be interfered with as little as possible. The violence which, if met by violence, will become still more aggravated, will often, if left to itself, subside even in the course of five or ten minutes. Whatever the duration of the violent accession, its continuance is a bar to anything but such management as protects the patient

and if so, he can be, unhappily, nothing else than a continued burthen on the Government of the colony."

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and those about him. It is in intervals of calmness that the foundations of moral treatment must be laid, and the confidence of the patient gained. To acquire this confidence is the key-stone of all moral treatment; and nothing will so much oppose its acquisition as brutal or even impatient usage during the paroxysm.

"In the meantime, supposing the violent state to continue, the other patients should be removed from the neighbourhood of the one who is excited; all obvious means of mischief should be guarded against; and the attendants, although not directly interfering, should be watchful and ready. A soothing word now and then, or something new to attract the attention, may be admissible; but all with discretion. Supposing, as must often happen, that the violent fit does not immediately subside, and that the patient continues to vociferate, to swear, to abuse and threaten those about him, and to endeavour to strike them, something more must be done. But in this condition the worst thing that can be done is to struggle violently with him, to overpower him, and to mortify him by putting on bodily restraint. The only reasonable object of any treatment is to tranquillize the violent man: and of all modes of effecting this, surely violence is the most unreasonable. Seclusion effects the object more certainly than restraint, and without any violence at all. A lunatic is seldom, even in his most raving fits, insensible to what is said to him: he will often show, among his wildest and most extravagant expressions, that he is watchful of the conduct of those about him; and when the ordinary observer would expect nothing from him but what indicated savage fury, those who are patient with him, and who, regardless of his wildness, continue to indicate their kind feelings towards him, will find that sometimes his voice falters, and his eyes fill with tears. These symptoms of emotion are very transient; but they show that the sensibilities are not quite oppressed; and they warn the practitioner, in language that ought not to be disregarded, to abstain from everything which can further wound or oppress the feelings of an almost ruined mind. These circumstances are now mentioned as bearing upon the man-

Robert Joachim was not sent home, and he is at this moment about the town, not only without any fixed

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ner in which the seclusion of a violent patient should be effected. Three or four attendants, possessed of courage and good temper, should surround him; and telling him that he would be much better if quiet, and in his own room, should endeavour, by gentle occasional efforts, to induce him to walk into it. It will sometimes be found, that although he protests loudly against the measure, his steps gradually proceed in the direction required. At the same time, steadiness and strength may be required to prevent his retrograding; but well-qualified attendants will not on this account resort to violence. If he strikes or kicks them, they must of course effect their purpose as speedily as possible, and with steadiness, and even with force; but always without passion. As soon as the patient is thus placed in his room, he is not unfrequently found to become quiet; or if he continues to talk loudly, it is not for a long period. In all probability he will soon lie down on his bed, and go to sleep. If he continues violent, he is at all events out of harm's way. He will very seldom attempt to hurt himself; and he can hurt no one else. The window of his room should in all cases be secured by an efficient shutter and lock. The bedstead, which should be of wood, should be fastened to the floor, and remote from the window. Sufficient light should be admitted through holes made in the window-shutter to enable the attendants, by looking through the inspection-plate in the door, frequently to ascertain the state of the patient.

"The abuse to which this seclusion is liable is that of being too prolonged. *A troublesome patient being once locked up, it is natural that the attendants should have no very anxious desire to let him out: but if the Superintendent is assisted by officers of proper activity, this abuse should be impossible.* The seclusion should in all cases be immediately reported; and after two or three hours, some officer of the Asylum should visit the patient, or at least look at him through the inspection-plate, so as to judge of the propriety of the seclusion being continued or put an end to. This should be done with great circumspection. If even the cover of the inspection-plate is moved roughly and noisily, the patient is

abode, but living on the promiscuous charity of the public, a prey both to *disease* and *poverty*.

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roused and irritated. Still greater mischief may be done by prematurely going into his room. A daily report should be made to the Superintendent of the patients who have been in seclusion, and the number of hours they have been secluded. It is impossible to lay down rules for the general length of seclusion: three hours, two hours, or one hour, in many cases answer every purpose. In other instances, after four or five hours, although the patient should be brought out, and a trial given of his capacity to behave well, it is not found practicable to have him at large among the other patients; and it is better to keep him in his room till the next day. *Many patients liable to periodical excitement, and especially females, are far more comfortable if kept in seclusion during the whole period of their excitement.*

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"There are many patients subject to paroxysms of excitement of about a week's duration, who, of their own accord, will keep in their rooms at such a time; and who, although the door is not locked, will seldom offer to come out. There were no patients more injured by the imposition of restraint than these: the character of some of them, even during their most excited state, is improved since its discontinuance; and at other times, instead of being a terror to the attendants and the officers, they are among the most affectionate and grateful patients in the house.

"The Resident Physician dwells more minutely on seclusion, because he considers it as one of the most important of curative means, and as one of the least objectionable substitutes for every kind of restraint. It is open to no objection which is not doubly applicable to restraint. All the possible evils of seclusion were included among the innumerable evils of bodily coercion. *Whilst the patients who were permitted to walk about in restraint were still capable of inflicting injury upon others, they were not protected from causes of irritation, or from the attacks of other patients.* When put in seclusion, it was a seclusion which did not tranquillize. The arms or the hands were closely confined to the body; or the arms, or the legs, were strapped or chained to the bedstead; or

This poor man was for a long time supported by the charity of Messrs. Reid, Davidson, and Co., merchants, of Colombo; but on the decease of the

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the head was confined by a strap round the neck. In this state they were left for days or for weeks, in the most miserable condition in which a human being could be placed, and often to the total ruin of all habits of cleanliness. The patients themselves, who now come to us from other asylums, reported 'violent and dirty,' sometimes remark, that they could not be otherwise than dirty, when they were chained down in a deep bed like a trough. The same patients, being freed from all restraint the moment they arrive at Hanwell, seldom prove dirty, and not always violent.

"To obviate every objection to seclusion, all the resources of the non-restraint system must be brought to bear upon it. The destruction of bedding and of clothing should be prevented by bedding properly secured in ticking covers, strongly sewed; and by clothing of the same material, fastened by small locks instead of buttons. If the patient will not lie in bed, warm boots, similarly fastened, should be constantly worn. So important do even trifling matters become as auxiliaries to this kind of treatment, that it may be right to mention that the ticking should be of the best and strongest manufacture, and carefully sewed with the strongest thread; or, in the case of male patients, with twine. Without proper precautions of this kind, the attendants will very probably report that the dresses and blanket-cases are useless. *The attendants should be continually exhorted to watch for all favorable opportunities to get the patient out of his room and into the open air; and the cleanliness of his apartment and person, and the proper administration of food to him, should be most scrupulously observed.*

"All proper medical means are compatible with this treatment; and although some cases must be expected to be much more troublesome than others; although, indeed, it is known to all familiar with insanity, that there are cases in which more or less of maniacal excitement will continue for six, eight, or ten months; yet, under this treatment, the management of such cases will be

first-named gentleman and the dissolution of the firm, he was left without any kind of maintenance. In accordance with the spirit of the *Ordinance*

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found less distressing, the temper and habits of the patients more controllable; and the return to reason steadier, and made with more gratifying circumstances, than where the confidence of the patient has been shaken, and the excitement of the malady aggravated by violence of any kind whatever. From the statements then made by the recovering patients, the Superintendent will learn, and having learned, ought never to forget, that every act of violence, that every word of irritation, that every injudicious expression of which the attendants were guilty, or into which he himself was betrayed during the most excited period of the patient's malady, remains recorded in the patient's mind; and that no act or word of kindness, no remission of severity, no little indulgence, no encouragement held out to the poor sufferer, passed unregarded."

The importance of the above quotations from Dr. Conolly's Report must be an excuse for the length to which they have extended. I am of all things anxious that no excuse might *ever* be tolerated by the Government of Ceylon for the re-use of the waistcoat, leg-locks, &c. &c., at Colombo. I do sincerely hope that the annexed (one of a few practical rules I composed for the guidance of the native servants at Hendelle in 1845) may uninterruptedly continue to be regarded as an axiom at the Lunatic Hospitel at Marandahn, viz.:

"That the servants, and all about the institution, do treat the patients, and particularly the insane, with unvarying kindness and sympathy; that they give them every encouragement and kind attention, always remembering that angry expressions and harsh conduct can but irritate, and not assuage, the emotions consequent on disease. All concerned with the insane should know that their duty is to assist and protect those who cannot generally assist and protect themselves."

N.B. The appointment of a *European* Medical Superintendent (who shall reside on the premises of the hospital), of one who has at least enjoyed the advantages of attending the classes at Hanwell, is, as I have herein and elsewhere shown, of the first importance.

relating to insane persons, he was taken before the *District Court*, with the view of obtaining an order from the *District Judge*, authorizing his admission into the Lunatic Asylum. We were summoned to give evidence, but it was not deemed *"proof"* sufficient, although the fact of the man's insanity was attested also by competent witnesses. The judge did not feel satisfied of Robert Joachim's insanity, although his conversation gave frequent and strong indications of mental imbecility. This gentleman remarked that *a bad memory* was no criterion of *lunacy*, and that therefore he must decline to interfere. Now, if we mistake not the reading of clause No. 4 of the said *Ordinance*, the decision of the *District Judge* in this instance was incorrect; for it declares that "if, upon view and examination of the said person, OR OTHER PROOF, the said District Court shall be satisfied that such person is an insane pauper," &c., "in such case the said District Court may make order for such insane person being conveyed to and placed in the Lunatic Asylum." We will grant, for the sake of argument, that the *"view and examination"* of the patient were inconclusive; but the *"other proof"* is, or was, decided and incontrovertible. The *"other proof"* embraced the evidence of three persons, and *two* of them medical men, and all long and well acquainted with the individual.

We have mentioned this in the cause of the insane poor of the colony, and without the slightest wish to

cast the faintest reflection on the Government officer mentioned.

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On the 1st of January, 1848, the Lunatic Hospital contained 58 cases, of which 35 were males and 23 females. During the year 1848, 40 cases have been admitted, of which 31 were males and 9 females. The average number of patients in hospital has been 56. The number of cured has been 8, of which 4 were males and 4 females. Of discharged per order of District Court, &c., 10, of which 8 were males and 2 females; and of dead, the number has been 21, of which 14 were males and 7 females. The preceding facts are given at one view in the annexed table, viz.

				M.	F.	TOTAL.
In the hospital on January 1st, 1848				35	23	58
Admitted				31	9	40
	M.	F.	TOTAL.	66	32	98
Cured . .	4	4	8			
Removed .	8	2	10			
Deserted .	4	0	4			
Dead . .	14	7	21			
	30	13	43	30	13	43
			Remaining	36	19	55

With respect to the cases admitted, it is a matter of regret that we can rarely obtain any history of my patients. There is reason to believe that the friends and relatives of insane persons but seldom care about removing them from home if they are *not* very troublesome or dangerous, and to this circumstance

doubtless is to be referred much and serious delay in the treatment of many cases. With regard to the native population, it is, perhaps, almost impossible to impress their minds with the importance of sending patients, directly on the occurrence of mental disorder, to the Lunatic Hospital; but the same cannot apply to the military and civil authorities about the island, who, we trust, will henceforth act on the suggestion here made, and not wait for the supervention of chronic or incurable disease, and only *then* forward the patient to our care. It has happened that patients have been admitted in dying circumstances, miserable and emaciated in the extreme, and it is not improbable that some such may have been restored to health, if they had received early and efficient treatment.

It but rarely happens that the insane among the dark population exhibit on admission any signs of *inflammatory action* of the brain or membranes; on the contrary, it is generally observed that the powers of life are one and all below par, and the vital manifestations reduced even considerably. The animal heat is commonly found diminished, the pulse feeble and slow, the countenance more or less anxious, and the features sunken. Combined with these symptoms, the cerebral functions may be either excited, as in mania, or depressed, as in imbecility and melancholia. On inquiry, the digestive organs will almost invariably exhibit signs of disorder; a healthy con-

dition of the abdominal secretions we look on as incompatible with mental disease. The tongue will present a whitish, or yellow and furred appearance; the appetite will be found either deficient, variable, or voracious; the abdomen will be seen distended with flatus, or, if not so, much flattened or retracted towards the spine; this latter condition is, in itself, a fair criterion of general debility, or, in other words, of that state of constitution which results from a disproportion in the supply and expenditure of the vital principle. In fact, the very same general description which will apply to our patients in Ceylon, obtained at Hanwell; and, what is more, a precisely similar plan of treatment we have found necessary both here and there.

It is with the dark and white population equally indispensable, on their admission into a Lunatic Hospital, to remove all and whatever means of restraint from their person. This is the first thing to be done, and not a minute should elapse ere it be proceeded with; for nothing is so well calculated to gain the confidence and good will of the patient, as a release from the pain, inconvenience, and general distress which every kind of mechanical restraint must produce.*

* A young woman, labouring under *violent and acute mania*, was admitted into Hanwell in 1842, closely restrained by various mechanical means. Among other things, her legs were tied together with a thick and heavy rope. I visited her in the *admission room*, and directly desired the attendants to release her from every kind

As personal neglect is necessarily the accompaniment of the waistcoat and leg-locks, and such like instruments of torture, the use of the bath is necessary, if only for cleanliness' sake; after the necessary ablutions, the patient should be attired in clean and comfortable clothing.

The offer of some refreshment is generally advisable; for, should the patient be disinclined to eat or drink, the attention shown will be attended with much good, and tend considerably to the removal of suspicion and mistrust, and thereby open up the means necessary to the successful employment of that moral restraint and direction held to be essential to the relief and cure of all mental disorders. Such is but the commencement of our treatment; the same principle of care, kindness, and attention must be continued without interruption. The physical comfort and well-being of the insane must never be overlooked. The apparel and the

of bondage. The persons who had brought her assured me she would do some serious mischief if she were untied; they were so much alarmed at my proceeding as to retire from the apartment whilst the female attendants were engaged in removing the waistcoat, ropes, &c. I addressed the patient in the most sympathising manner, and told her how cruelly I considered she had been treated, and how unnecessary I felt it must have been to use her so harshly as those about her had done. I expressed my confidence in her good behaviour, and promised her my protection, &c. On finding herself free, and her limbs and body unfettered, she laughed wildly, then threw herself into my arms in the fulness of her gratitude and attachment, and afterwards fell on her knees in prayer and thanksgiving. She was discharged *cured* within the month.

bedding must be supplied in proper quantities, and of the necessary quality; and they must be frequently changed.*

The wards and apartments they occupy must be well sheltered and ventilated, and kept scrupulously neat and clean.

The classification of the inmates of a Lunatic Hospital is an important point; and, above all things, the *dirty*, *noisy*, and *violent* patients should be made to occupy single rooms. All attention should be given to the wants and wishes of the insane, and every encouragement awarded to their exertions at self-control. Their fancies and weaknesses should on no account be ridiculed, but should rather be made the instruments of their well-being and recovery. If it be ever found necessary to refuse them anything required, they should be made to understand the reasons for so doing; and, moreover, the refusal should be conveyed in the most gentle and sympathising manner. A trifling indulgence may, not unfrequently, work wonders; and prove, under certain circumstances, the stepping-stone to a complete recovery; and the withholding of a small favour may, now and then, work

* The following order is contained in the day- or scrap-book in use at the Lunatic Hospital, viz. "*It should be considered as a rule that each patient is found with a mat, a pillow, and a blanket, for night accommodation.*" The protection of the body of the native from atmospheric influences I consider of the first importance in the prevention and cure of diseased action, and particularly of *fevers* and *dysentery*.

much and terrible mischief. We have known the mere refusal of a cigar to an insane gentleman in Ceylon, accustomed to smoke, to act as a sufficient cause of a maniacal paroxysm; but the refusing party was both incompetent to the management of the insane, and ignorant of the nature and treatment of cerebral disorders.*

The late Sir William Ellis writes: "There is reason to believe that if a proper degree of liberty be allowed the insane, and objects be presented to the mind with which it had been previously familiar and interested, many might at least be partially introduced into society, and enjoy much of happiness, who are now, in all ranks, doomed to incarceration for life." Keeping this excellent principle in view, and anxious to give the inmates of the Lunatic Hospital at Marandahn all the advantages to be derived from its operation, they are accustomed to walk out, and about the neighbourhood, in parties of five or six, or even more. By so doing, not only is the mind relieved from all monotonous feeling, old associations renewed, and new impulses to thought and

* Did the party alluded to not deserve this censure, the patient would not have been tortured with cruel and galling restraints, and at the same time irritated by the presence of a menial, whose orders were to sit by his (the patient's) side, and keep the eyelids closed and covered with a handkerchief, and so exclude the light.

> "Can such things be,
> And overcome us like a summer cloud,
> Without our special wonder?"

I answer the bard of Avon—No!

action generated, but the exercise of body which they thus enjoy must contribute in a great degree to the preservation of the general health, and thereby diminish their susceptibility of disease. Some of the male patients are in the habit of accompanying the servants to the native bazaar, and they afford much assistance in carrying home the provisions, &c., from the commissariat department. In the absence of any *systematic employment,* these practices are indispensable. We may add here, the great importance of *occupation* among the lunatics did not fail to strike the *Committee* deputed by the Legislative Council to inquire into and report upon their condition and requirements so long back as 1843; and the gentlemen composing it *then* recommended that the patients might be employed in the manufacture of mats and such light work. A reference to former Reports will show that this kind of employment has been introduced by us, although of the above suggestion of the said Committee we were ignorant until within these few weeks. At Hanwell the patients used to be employed in picking in pieces the fibres of the outer husk of the *cocoa-nut,* which, in England, is becoming much substituted for horsehair; and we would here recommend the same occupation to the native insane in Ceylon. The manufacture of the brooms and brushes in use in the colony, as well as that of tats, fans, screens, and cadjans, all in every-day use, and therefore in great request, may be made the source of a *fund,* which may be, in many ways, appro-

priated to thc comfort and advantage of thc patients generally, and partieularly of those engaged in making them. Heneoops and fowlpens eould be easily made by the patients, and, if we mistake not, their sale eould be effeeted without trouble. The first purehase of the stieks, bamboo, and other vegetable produets required would amount to but a trifle. The manufaeture of the eoeoa-nut oil may be, we think, as easily aeeomplished as the preeeding small artieles herc mentioned. It may be thought that we attaeh too much importance to the oeeupation of the insane, but we regard it only as a remedial measure.

It must never be forgotten that a generous diet is, as a rule, of the greatest use in the treatment of insanity; but the dietetie treatment we must presently consider in some detail.

The preėeding observations, it will be observed, relate to the hygienie management of the lunatie; but, however mueh importance may be, and very properly is, attaehed to it, the medical treatment of eerebral disorders must on no aeeount be overlooked.

The indieations of insanity may be assoeiated either with an exalted or a diminished aetion of a portion or portions of the eerebrum, and in some eases the whole organ may be similarly affeeted, and hence the treatment must be adapted to individual eireumstanees. If there be present signs of inflammatory disturbance of the brain or membranes, that is, if the scalp be hot and the countenanee flushed,

&e., and partieularly if the ease be recent and the health previously unimpaired, blood should be direetly taken from the arm; but *generally* the applieation of eight or twelve or twenty leeehes behind the ears, or to the nape of the neek, will be found sufficient. The bowels should be freely aeted on; and nothing will be found to answer better in these eases than a dose of ealomel followed by the eompound jalap powder, in doses proportionate to the age and strength, &e., of the patient. If at any time the mental exeite-ment be great and the eonduet violent, and the strength of the patient will justify the remedy, a mixture of tartar emetie and morphia, in full and repeated doses, will quiekly subdue him; or, if he will not swallow this, the solution ean be thrown into the reetum. We have adopted this latter plan with great sueeess, in the person of a private patient lately under our charge. He was suffering from aeute mania of the most distressing kind: he quite reeovered. These remedies ean be persisted in as the symptoms seem to warrant. If the head be hot, eold lotions, &c., should be used.

The warm bath is of great benefit when the eutaneous seeretion is insufficient, and the tem-perature of the body increased. At Hanwell, it is the praetiee, under sueh eireumstanees, to immerse the body in hot water up to the neek, the head of the patient being plaeed beneath the shower-bath.

Purgative medieines are of great value in cerebral

diseases, and should on no account be omitted whatever the form of insanity, and however complicated it may be with constitutional disorders; but such must be given discriminately.

Wherever insanity is supposed to be caused by a chronic meningeal inflammation, *mercury* is indispensable, as much so as it is in the treatment of a case of syphilitic iritis. Calomel, with opium or henbane or morphia, should be given two or three times a day, with the view of inducing ptyalism and of subduing cerebral irritation; care being taken to ensure a proper action of the bowels. In this form of the disease counter-irritation is of great service.

Among the poor and half-starved insane admitted into the Hanwell Hospital, mental excitement or irritation was found to be more easily controlled by repeated doses of tr. hyoscyam. or morphia than anything else, coupled with due attention to the bowels, and backed by a generous and wholesome diet; for in them the cerebral symptoms were associated with signs of debility or asthenia.

We have said above that the digestive organs are generally seen impaired, and the vital powers more or less obstructed. To relieve the morbid state of the first, our practice is to direct the following powder to be given twice or thrice weekly:

℞ Hydr. sub., gr. ij;
Pulv. rhei, gr. viij;
Pulv. jalap., gr. xiv;
Ol. menth. pip., gr. ij.
M. ft. pulv. p.

Should this not act sufficiently on the bowcls, we prescribe *p. jalapæ co. c. potas. nit.* to succced it, or a solution of mag. sulph. in infus. calumb. or quassia with tr. card. co.; but should *diarrhœa* be superadded to the other symptoms, we givc the hydr. c. creta c. pulv. Doveri, of each five grains, at night, and ol. ricini, or Gregory's powder, in the morning; a proper attention to the diet is of course necessary. Leeches may or may not be required to the abdomen.

If the surface of the body be cold, the pulse feeble, and the body greatly emaciated, *wine* and bottled beer will be found the best *tonic*, in the use of which we may not *then* be deterred by even maniacal excitement or sleeplessness.

In less urgent cases, quinine or carb. ferri is given, and this treatment may with advantage be combined with the use of an alterative aperient, viz., pil. hydr. c. p. rhei, and to which the extr. hyos. is added with much advantage, when there are much restlessness and inquietude of mind.

He will prove the best physician who adds to his medical treatment the necessary hygienic management, and fails not to bear well in mind that the mental affection he is dealing with may be, if not absolutely, caused by disease of a distant organ, at least much aggravated by such; the stomach, uterus, and brain hold too intimate a relationship the one to the other, to be ever forgotten by the medical practitioner.

In the preeeding remarks are contained merely a summary of the *general* principles of treatment we find of most use, and which therefore we would recommend for the consideration of whomsoever may sueceed to the duties of the offiee we are antiei-pating to be called on to resign.

Although the number of *cures* in the past year, 1848, is not what we eould wish, yet, under all the cireumstanees, there is reason to feel satisfied with the suceess realized. So far as the rate of *mortality* is coneerned, it becomes our painful duty to notiee a great increase in the number of deaths during 1848, as eompared with the three preceding years, viz. 1845, 1846, and 1847. By referring to the last Report, it will be seen that the mortality has progressively diminished from the period of our arrival in the eolony, viz. Deeember 1844, up to Oetober of last year, 1847; and therein it will appear also we have treated of the subjeet of *diet* in eonnexion with the mortality of the insane.

In the Report for 1847, we have attempted to prove, that the increased mortality whieh took plaee at the end of that year, could not be dependent on causes to be referred to the site of the new Asylum; because there was every reason to feel satisfied that the loeality it oecupied was highly salubrious, and that therefore the greater number of deaths eould only be attributed to the altered diet. The additional experienee of another year compels us to

abide by the above opinion. On July 1, 1847, the new dietary came into operation, and from the September following, up to the present time, the *deaths* have continued on the increase; and they have been caused commonly by *"general debility,"* and not by disease of any kind considered referable to *miasma.* This is an important fact, and on no account to be lost sight of in investigating the *cause* of this increased mortality among the lunatics at Marandahn.

Although much fault has been found with the site of the new Lunatic Hospital, and many objections made to the sheltered position which it occupies to the *west* of the rising ground near the Cotta road, and although so general a preference has been given to the ridge of land on which the Jail stands, as a site for the said hospital, yet does it appear certain that the decision of the late Sir Colin Campbell has proved a very happy one. Now that the ground about the building is levelled, and put in some order, not only is there seen to be no evidence of swamp or moisture, but the soil is proved to be everywhere rather dry and sandy. If it were otherwise, such would be necessarily made known by the occurrence of febrile and dysenteric complaints: from the former the inmates of the Lunatic Hospital are almost entirely free, and *dysentery* has been of occasional occurrence only; whereas the prisoners at the Jail have suffered greatly from both of these complaints. Whilst the average per centage of sick at the

former establishment has been, say five per cent., that at the latter named has been as high as twelve and sixteen per cent.*

Now, in the face of facts like these, it would be perfect madness to attribute the increased mortality among the insane to the locality of the hospital: the *site* cannot by any possibility be held as the *cause* of such an *effect*. On the other hand, we are satisfied that to the *site* the insane are mainly indebted for their immunity from much suffering and disease. If the Lunatic Hospital had been built on the higher ground, to the back of the Cotta road, where the Jail stands, its inmates, like the prisoners, would then in all probability have suffered from fevers and dysentery, and the per centage of sick among them

* The *monthly summary* of cases treated among the insane, and the contents of the *death reports*, will together prove the assertions made in the text, viz., that the cause of death has been mostly *general debility* (in the proportion of sixteen to twenty-one deaths); that the insane have suffered but slightly from fever and dysentery; and that the per centage of sick to the whole number of patients has rarely exceeded five per cent. The documents mentioned are at the P. C. M. O.'s office.

A fair and unprejudiced comparison of *Hendelle* and *Marandahn*, regarded as sites for a public hospital, goes to show that the advantages are plainly on the side of the latter. I have not yet known the patients at *Marandahn* suffer from epidemic disease of any kind, as they did at *Hendelle* in 1845.

The threatened removal of the insane back to *Hendelle* could in no way be justified; but to what monstrous courses will not the lower feelings, when misdirected and uncontrolled, prompt their possessors.

would then have reached the fearful climax shown in the Jail returns.*

If during the years 1845 and 1846, and through the greater part of 1847, the mortality among the

* The ground adjoining the Jail, as is well known, slopes to the *south* and *east*, until it reaches some low and swampy land extending a few miles towards the interior. Between this *low and swampy land* and the building there was a tolerably thick belt of jungle; this was cut away, and ever since *fever and dysentery* have made sad havock among the prisoners.

The Lunatic Hospital is effectually sheltered from the miasma generated by this same low and swampy ground by a belt or irregular semicircle of land, rising directly behind the Lunatic Hospital to the height of about thirty or forty feet; and hence is it its inmates escape the sickness so common to those of the Jail.

The above explanation is well borne out by the experience of Dr. Fergusson, who, in his 'Professional Notes,' says: "In selecting situations for forts and barracks, it has been observed with surprise, that the border, and even the centre of the marsh, proved a less dangerous quarter than the neighbouring heights of the purest soil and healthiest temperature." Several examples of this fact are given. Dr. Fergusson proceeds: "Another property of the marsh-poison is its attraction for, or rather its adherence to, lofty umbrageous trees. . . .

"This is so much the case, that it can with difficulty be separated from them; and in the territory of Guiana particularly, where these trees abound, it is wonderful to see how near to leeward of the most pestiferous marshes the settlers, provided they have this security, will venture, and that with comparative impunity, to place their habitations."

The towns of New Amsterdam, Berbice, and of Paramaribo, the capital of Surinam, are said by Dr. Fergusson to owe their immunity from marsh-poison to the existence of trees with a spreading foliage, placed between certain swamps and the said towns. The inhabitants are said to be quite aware "*that to cut down the trees would be a most dangerous operation in itself, and would certainly be productive of pestilence to the town.*" The *marsh-*

lunatics was progressively diminished, and if from September the number of deaths has been on the increase, is it not fair to infer that the introduction of the new dietary in July of last year, has not been without certain injurious effects on the health and longevity of the insane at Marandahn? Is it not on

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poison, I may add, is regarded by Dr. Fergusson as an element in every way unlike that of *putrefaction;* and he thinks it the product of *exsiccation*, occurring *after* rainy or damp weather. This is a strange theory doubtless, but not unsupported. Dr. Yates says, "*fever in Egypt is most prevalent during the summer heats.*"

The able work of Dr. Dunglison, entitled 'Elements of Hygiene,' contains ample information on this head; and vol. i of the 'British and Foreign Med. Review' may be also consulted with advantage. In an able article therein published are these words:

"Among these laws (of malaria) it seems to be ascertained that, by reason of its specific gravity, it is during the night in greatest concentration near the surface of the earth, so that the inhabitants of the lower stories of houses are most exposed to its agency. But if a man build his house on a hill-top, thither also may malaria pursue him; for the buoyant aqueous vapour during the day carries up the heavier noxious exhalation. A high wall, or *barricade*, or an intervening wood, may be a *protection against it:* and in several situations near the Pontine Marshes, trees having been cut down or forests cleared, fevers and other affections, from which such places were free, have made their appearance. The occasional prevalence of malarious diseases upon heights in the vicinity of marshes seems explained by the raising of the heavier miasmata with the lighter vapours, as above mentioned."

The present large amount of sickness at the Jail it is seen, occurred subsequently to the clearing away of the jungle on the slope from the Jail to the low and marshy land; the *belt of land* between the Lunatic Hospital and the source of the *marsh-poison* has been mentioned as the *barricade* or *protection against it.*

such grounds legitimately to be concluded, that the breaking-up of the powers of life, without any apparent morbid action in the system, or, in other words, the *"general debility"* of which the insane have died, has been caused by the diet in use among them, and particularly so when that diet is plainly deficient in both quantity and quality? As regards the former—"quantity"—our last Report to the Government contains all we need say on the subject, and therefore to it we would here call the attention of our readers. We may, however, here observe, that the opinions therein quoted from Drs. Conolly and Thurnham have been in every way verified at Marandahn; for nothing can be more certain than that the increased *"mortality"* and the altered dietary have gone hand in hand. *"A low" or improper "diet conduces to a high mortality, and the deaths diminish when the diet is improved,"* is well observed by the former of these eminent writers.

We have alluded above to the *quality* of the diet in use among the insane, and we must here insist again on the necessity of a greater *variety* in the food supplied for their use. *Beef* and *rice* day by day, for ever, cannot be else than injurious to the health of the lunatic, and so of *fish* and *rice*; the religious prejudices of some of the patients forbid them eating *beef*. *Vegetables* and *fruit* are indispensable for the due support and nourishment of the dark races of mankind, both under circumstances

of *health* and *disease.* Inasmuch as insanity is generally a disease which is accompanied by *debility* in some shape or other, and which, in nine cases out of ten, requires for its relief and cure the employment of a tonic plan of treatment, and furthermore tends in its natural progress to exhaust the vital energies, and slowly yet surely hastens the dissolution of the body, it cannot be doubted that a generous diet is alone applicable to this disorder. *A variety of food* is no less necessary than a sufficient *quantity ;* and in the treatment of the native lunatic it is evidently indispensable not to lose sight of his natural and original habits, and the certain adaptation of his organism, or, what is the same thing, of his constitutional peculiarities to the soil and climate about him.

In the Report of the Jail and Hospital Committee, to which we have found occasion to refer before in these pages, are these words: "The diet of the lunatics being identical with that of the prisoners (except when they are under special treatment), is also peculiarly unsuitable to persons labouring under disease. *In a word, it consists of the very same food, without variation, day after day, all the year round."* This last sentence was written on the 11th of April, 1844; and at this time, *nearly five years after,* the very same objection is required to be repeated. —STRANGE ! !

The nature of the *black man* is as essentially

tropical as the *vegetables* and *fruit* so bountifully and providently found for him; and on this ground alone would we object to the sameness of the diet in use among the insane; and particularly to the omission of all vegetable food, by which is meant the sweet potato, yam, plantain, cocoa-nut, jack fruit, &c. &c., substances as requisite to the Indian population as the coarse meat and blubber fare of the North American is to him.*

The celebrated Liebig, whose discoveries in animal chemistry have gained him a celebrity second to no living philosopher, teaches us that the food of man must conform to the peculiar nature of his organism; and that, inasmuch as *it* is compounded of many distinct elements, each one holding a fixed relation to every other, it becomes necessary, if we would preserve *health*, so to manage our diet as to keep up a proper supply of such several elements which compose the said organism; and to accomplish this, it is demonstrated by Liebig, a great variety of both animal and vegetable substances is indispensable. All writers on dietetics advocate the necessity of a *mixed diet*, but Liebig has, more successfully than any other writer,

* That *man* is everywhere, in every region of the globe, *omnivorous*, there can be no reasonable doubt. The inhabitant of both the torrid and frigid zones would be benefited by a less exclusive diet than either one adopts: the first is benefited by a small portion of animal food, whilst the second would do well to partake moderately of vegetables and fruit.

shown on what grounds a great *variety* of animal and vegetable food is necessary to the health of man.*

Dr. Fergusson, in his 'Professional Notes' before quoted, when treating of the *diet* and *rations* of the British soldier, says: "A great physiological principle seems always to have been overlooked, and that is, the natural appetite for *change* and *variety*; it is ever the same, and no man, even if he will, can be satisfied with this. His stomach and digestive organs will be heard in their own cause, and if they be not attended to, their owner will fly to *alcohol* in solace of the disappointment. There is a mistake here; for if we wish to wean the soldier from drunkenness, we should be careful to place within his reach more wholesome indulgences, of which a diet suited to his taste (*and it cannot be so suited without variety*) must ever be the first. . . . The appetite for *variety*, however much it may be abused by the voluptuary for the sake of sensual gratification, is in itself an *instinct* of nature, prompting the change which the health requires."† The same author, when treating

* For much valuable information on this head, consult the Essays by Mr. G. Ross, on *Digestion and Nutrition*, contained in the 'Lancet' for 1843 and 1844.

† The succeeding remarks are highly appropriate, they are copied from Thurnham's 'Statistics of Insanity,' viz.:

"An intelligent authoress observes, potatoes are perhaps as wholesome a vegetable as any in the world, when they are good in their kind; but it is a mistake to suppose it is healthful to live on them entirely. The Irish have a great deal of disease among them. Different forms of stomach complaint are very prevalent;

of "*the employment of black troops,*" says: "*His*" (the negro's) "diet and subsistence seem to have been equally mistaken. With national prejudice and bigotry, we seem to insist that whatever tribe or nation we take into our pay shall forthwith be dubbed British soldiers, and be gifted with the tastes and digestive organs of their new estate. Our full pay is lavished upon them, and our rations, as it were, forced down their throats. But the negro does not require more than about a fourth part of the salt meat; he, until corrupted, detests the rum; the bread or biscuit is in far too concentrated a form to be agreeable to him; of the sugar he would take ten times as much if he could get it; and all the other articles, unless when in the field, and removed from his markets, could be spared, for he will feed himself far better from the produce of the colony, with the plantain, the yam, the sweet potato, &c.; because in them he will procure a far bulkier and more savoury meal, seasoned, as he well knows how, with the native peppers, and a small portion of salt provision to give a relish; and in this way he prepares a mess, which even the epicure, were he in the bivouac, might

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and, what is remarkable, it is by no means unusual to meet with persons whose constitutions never can bear potatoes, though they and their parents had been used to them from youth. They linger on in ill-heath, which is immediately removed on changing their diet. This I observed during many years' personal experience.—(Woman's Rights and Duties, vol. ii, p. 17, 1840.)

envy." The negro and the *Asiatic* are not dissimilar in their constitutions, and modes or habits of life; and with whatever force the preceding remarks apply to the *sane*, they will do so with even greater force or propriety to the insane.

Now, Dr. Fergusson very properly tells us that the desire for a *variety of food* is an *instinct* of nature, and, upon the authority of Dr. Billing,* *natural instinct* should on no account be *thwarted* in the management or treatment of disease. It is *instinct* only which creates the desire for an excess of vegetable aliment among the dark races. It is *instinct* which induces the native population of Ceylon to show so much partiality to the vegetables and fruits of the country, to the yam, cocoa-nut, plantain, jack fruit, &c.

"If the climate of a country should in a great measure guide man in his selection of food, those productions which are most abundant around him being most appropriate to the circumstances in which he is placed;"† and if moreover "the previous habits of the insane *do* actually, to a great extent, modify their necessities as regards *diet*," and which "previous habits of the patient should *not* be forgotten,"‡ why then, on these two grounds, do we venture to recommend most earnestly that the present dietary in use at the Lunatic Hospital may be

* First Principles of Medicine, 4th edition, p. 109.

† See Copland's Medical Dictionary, article *Climate*.

‡ See Statistics of Insanity, by Dr. Thurnham.

modified accordingly; for we cannot do less than conclude that it is wholly inadequate to the wants of the insane, and hence is it the number of deaths among them has so greatly increased since its introduction in the past year, 1847.

Drs. Conolly and Millingen, whose experience at the Middlesex County Lunatic Hospital at Hanwell alone entitles them to rank as the very highest authorities in all matters relating to the insane, strongly support the preceding views and sentiments.*

We have said the *cause of death* among the insane has been, in the greater number of instances, *general debility*; an inquiry into its nature and causes, &c., may perhaps afford additional evidence of the position here taken. *General debility*, as it is manifested among the insane, consists of, as the name implies, a universal languor and inaction of the animal solids. Every portion of the organism executes its allotted function only partially, because the *vis vitæ*, everywhere diffused, is inadequate to the due stimulation of the organs of life. The animal heat is diminished, the stomach and digestive apparatus give indications of a want of natural power; the heart and its dependent vessels are manifestly enfeebled, and the force of the circulation therefore much below par; the respiration is slow, and the expired air but imper-

* See Conolly's Lectures on Insanity, published in the 'Lancet' for 1845, and his Reports of the Hanwell Asylum; also, Millingen's Aphorisms of Insanity.

fectly decarbonized; the sexual function is said to be lost, and the cerebro-spinal system partakes of the deficient energy of the other parts of the body—the intellectual powers and the affections, like voluntary motion and sensation, being together insensible to all ordinary excitants. The individual is observed to become more and more emaciated.

The patients so affected sit or mope about the galleries or sleeping apartments, reminding one of so many inanimate objects. Such are, of course, without care or hope, sorrow or joy: LIFE is reduced to a kind of rude vegetation, which continuing to progress, *death,* with slow and almost imperceptible strides, advances on its victim.

The fatal termination of *general debility* is greatly accelerated, both in Ceylon and England, by a sudden fall of the thermometer; already on the brink of the grave, the patient cannot be expected to combat successfully against any diminution of temperature, however slight. The occurrence of the monsoon or rain in this country, and the approach of winter at home, are almost certain destruction to patients so affected.

In some instances, during the progress of the symptoms described, the commencement, progress, and termination of which are alike insidious, the extremities become œdematous, and in others the patient suffers from a colliquative diarrhœa, and not unfrequently the generation of lumbrici in the intestinal canal gives rise to dysentery; a circumstance of fre-

quent occurrence among the dark races, sane and insane.* *General debility,* as it occurs among the insane, is but rarely associated with any very marked signs or evidences of local or organic disease, either before or after death.

So much for the *nature* of this morbid affection; we will proceed to consider its reputed cause.

The CAUSE of *general debility,* as it occurs among the insane, may very properly be ascribed to cerebral disorder; for the latter, even when it does not proceed to such a length as to be recognised as *insanity,* is, according to Dr. Copland, among the most fertile sources of *general debility,* or, what is the same thing, of premature climacteric decay. There is, then, a predisposition in the *lunatic* to this *asthenic* condition of the constitution, known by the name of *general debility,* and this is proved not only theoretically, but by the records of every hospital for the insane. A reference to the causes of death at Hanwell, among its inmates, will show that the mortality is to a great extent dependent on its occurrence. *General debility* is also caused by insufficient or inappropriate nourishment; and, according to

* Pinel's remarks on the great increase in the mortality from *colliquative diarrhœa and dysentery,* which succeeded to a great reduction of the diet at the Bicêtre, under the direction of the revolutionary government in 1795 (l'an 4), are worthy of particular observation. (Traité sur la Manie, an 9, p. 217; Davis's Translation, p. 209.) The disappearance of the same diseases on the adoption of a more generous diet has, in several instances, been observed in the pauper asylums of our own country.—Thurnham.

Dr. Copland,* "*those who are obliged to live on one kind of food alone*" are very liable to its attacks ; and so also, it is thought, are all persons subject to confinement of any kind, upon whom a certain moral incubus is ever exercising effects, more or less pernicious, on the physical man. Under such circumstances, then, we cannot feel surprised either at the prevalence of *general debility* among the patients at Marandahn, or at the number of deaths caused by it, seeing that there are such various and dissimilar causes of the same in operation among them.

To reduce the mortality, it is necessary, as we have already stated, to introduce another and improved dietary among the insane, and we do sincerely hope that this matter may receive a speedy attention at the hands of the local Government.

We need hardly add, that the prescribing of *extras*, as wine, fowl, fruit, &c., from day to day, as individual patients may seem to need such, can be no argument against the introduction of a more liberal diet for *general* use. It is to the *prevention* of disease we would here be understood to call attention, and not to its treatment. The premature *decay* and *death* of the lunatic illustrate strikingly "*the result of gradual causes long in unperceived operation*" (Combe).

It should be remembered the altered dietary was commenced in July of last year, 1847, and that the deaths began to increase about four months after-

* See his Medical Dictionary, article *Debility*, p. 474 and sequel.

wards, and moreover the mortality has gone on in an increasing ratio from that time to the present.*

* The subjoined extract from an anonymous letter, which appeared in the 'Ceylon Times,' dated 9th June, 1848, is here introduced as a sample of the ungenerous nature of the opposition which has manifested itself to me and my appointment at Ceylon. It is written, I am told, by the gentleman in charge of the apothecaries' stores at Colombo, himself a medical man, and an assistant-surgeon in her Majesty's army. I offer the author of this production, whoever he may be, my thanks, for evidence so conclusive of his prejudice and partiality: to reason with such a person would be to prostitute man's best gift of his Creator; to advocate the cause of truth and equity in the hearing of such a one not less absurd and distasteful to his feelings. There is, if I mistake not, an affinity more or less natural between *Lassitudo* and his friends, a mutual reaction between their several elements. Let them take heed, lest the introduction of some other agent develope laws both new and strange, and decompose the hitherto apparently homogeneous mass—

"When rogues fall out," &c.

In common justice to the P. C. M. O., whom *Lassitudo* names, I should add, he has never on any one occasion interfered with me in the treatment of my patients individually, that is, with my knowledge. As regards the medical assistant residing at the Lunatic Hospital, who is likewise dragged into the controversy, had *he* never deserved at my hands the official reports rendered of his serious neglect and unfaithful discharge of duty, I should have been saved ere now much anxiety and trouble. I regret to be obliged to allude to this matter, even in *self-defence.*

Extract from a letter, signed *Lassitudo:*

"Everybody knows that, beyond the established diet *which* is more than ample" (!!), "it is at Dr. Davey's discretion to order any *extras* for his patients that he may think necessary, fowls, eggs, butcher's meat, beer, wine, spirits, and the like; and all *reasonable men* will admit that, if the insane do die from insufficient or improper food under such a very liberal system, Dr. Davey, *and Dr. Davey alone*, is to blame."

Lassitudo pretends in vain to believe that these said *extras* are de-

Had the P. C. M. O. (Dr. Roe) ever had the slightest idea of such, we doubt not he would have

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signed for anything else than for *particular* use, or that such are ever employed in hospital practice but as a part and parcel of the requisite treatment of individual cases, of whatever kind, precisely as quinine, calomel, iodine, &c. &c., are prescribed. So much for *Lassitudo* and *journalism in Ceylon.*

Apropos, *Lassitudo* does not probably remember that the P. C. M. O. in 1845 desired me *not* to prescribe extras for "mad people." "What could they want with wine?" This fact is reported to the Colonial Secretary.

Mem.—Since the above was written, the annexed correspondence has transpired, and which illustrates admirably the doubtful and specious evidence of LASSITUDO.

"Principal Civil Medical Officer's Office,
"Colombo, 18th December, 1848.

"SIR,—On examining the diet table, and of extra articles of diet consumed in the hospital of the lunatics at Wellicadde, for November last.

"I have the honour to remark to you that the patients M—— and M'E—— have been ordered an extraordinary quantity of food besides the ordinary diet, consisting of twelve ounces" (?) "of beef and twelve ounces of bread, with coffee and rice per diem; you have added the great sum to one of fifteen fowls, to the other of twenty-two fowls; of beer thirty bottles" (?); "to the other of nineteen bottles" (?); "of eggs ninety, to the other of sixty, which may be more nutriment than beneficial to lunatic patients who have been generally in a state of great *excitement* and *fury*.

"I beg to have your reasons for incurring this very considerable and additional expense. "I have, &c.

(Signed) "S. C. ROE, M.D., P.C.M.O.

"Dr. Davey.
Supt. of the Lunatic Asylum, Wellicadde."

"19th December, 1848.

"SIR,—I have the honour to acknowledge the receipt of your letter dated 18th Dec. 1848, and in answer to it beg to observe

adopted the more liberal dietary we thought proper to suggest for the use of the insane, instead of that now in use.

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that the additional '*nutriment*' ordered for the patients therein named, I have considered indispensably necessary in the treatment of their cases. I may here add, that it is held as an axiom that the '*excitement*' and '*fury*,' to use your own words, of insanity, are (*in the majority of cases*) but evidences of VITAL EXHAUSTION, and constitute merely an *asthenic or* '*atonic delirium*,' and are of much the same nature as such which obtain in the advanced stages of *typhoid* fevers.

"Messrs. M—— and M'E——, whom you mention, have greatly benefited by the treatment adopted, and instead of being *emaciated* and *exsanguine*, they *now* present a physical appearance indicative of tolerable *health* rather than otherwise. The clinical notices of them will show that the '*excitement*,' or rather the mental inquietude of both has diminished on the employment of a generous diet; neither the one nor the other of them any longer tear and destroy their apparel or bedding, nor are their habits so dirty and uncontrolled as formerly.

The '*ordinary diet*' you mention is much too little for insane patients (European), who require to be liberally fed.

However, so far as my *experience* has gone at HANWELL, I am unaware that the food allowed for Messrs. M—— and M'E—— has, at any time, under the circumstances of either case, been of '*an extraordinary quantity*;' nor can I allow that any '*additional expense*' can, else than as an exception to the rule, accompany the employment of means calculated at once to increase the number of cures, and to diminish that of the deaths among the insane.

"I have, &c.
(Signed) "J. G. DAVEY.

"P. S.—Mr. M'E—— has of late so much improved in his general health, and has become so orderly and well conducted, as to remain with the other patients (without so much as the necessity of an occasional *seclusion* in his room), and even to walk out and about the premises, that a few days since I discontinued his *pint* of beer daily, thereby depriving him, for

The appearances *post mortem* we have found in Ceylon of much the same nature as those described by

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medical reasons, of *one* important item in the dictary in *general* and *daily* use at all the best lunatic hospitals in Europe, including *Hanwell*, which ranks both as an *authority* and *example* to all else in Europe,—a fact referable only to the high reputation of its first physician, Dr. Conolly." [Mr. M'E—— was discharged "cured," after some weeks.]

I may add here, *Lassitudo* has either a shocking bad memory or he writes *not* what he knows, but rather what he wishes to be credited, for he has told his friend, the *Editor of the Times*, and through him the public of Ceylon, that "it is, no doubt, lamentable that the insane are *now* dying in larger numbers than they *ever* did before......This melancholy *truth*" (! !) &c. &c. The above statement, dated also 9th June, 1848, is quite untrue. Among the records in the Principal Civil Medical Officer's Office, *Lassitudo* will find documents, authorized and official, which show that *whilst* the mortality at the new Lunatic Hospital at Marandahn has been, in 1848, 35 + per cent. per annum (for the reasons explained), that at the old Leper Hospital at Hendelle, in 1843, reached so high as 60 per cent. (so at least I am informed, in a note now lying on the table on which I write), but perhaps *Lassitudo* may find some way to implicate *me* in this responsibility, although I was *then*, in 1843, well and fully occupied at Hanwell. When *selfishness* or *expediency* take the helm in hand, the ship is commonly carried into new and strange seas. *Dr. Roe* also has taken no small pains to promulgate the above error of *Lassitudo*, as I know full well; with one object in view, they have together employed the same *exquisite* means.

N.B.—If by the word "*now*" the then *present* is or was meant, it may, probably, be some satisfaction to *Lassitudo* to learn that in *June*, when he sent his epistle to the Times' Editor, but *one* patient died (one out of 58, or about 21—not 60—per cent. per annum). If "*now*" is or was intended to signify, not the said *month* but the second *quarter* of the year (1848), *Lassitudo* may be pleased to know, that during it six of the insane died, and which number considered in connexion with the average

us in a paper entitled "the Pathology of Insanity," published in vol. 1 of the 'Zoist,' 1844.

Among both the white and dark raees, the arachnoid membrane is more eommonly found disorganized than anything else within the eranium, that is, in lunacy. It is more generally than otherwise spotted with opaeity, the intervening portions of the membrane presenting a natural charaeter; eombined with this morbid appearanee, there is sometimes seen an effusion of serous fluid beneath the arachnoid membrane, and in contact with the pia mater and the surface of the eerebral eonvolutions.

On examination of the last insane patient which died under my care, this effusion of serum between the araehnoid and pia mater was found not only in considerable quantity, but of a thick gelatinous eon-

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total under treatment, viz. 60, gives about 38 or 40—but not 60—per cent. per annum. However melaneholy the truth here set forth may be, it falls dreadfully short of the mortality among the insane at Hendelle in 1843, as here demonstrated. So mueh for the veraeity of *Lassitudo;* but in order to enable the reader to judge yet more elearly of the faets of the ease, I may take this opportunity to inform him that, in spite of the disadvantages which have beset me, a eomparison of the average mortality among the insane at Hendelle of the four years preeeding my arrival in the eolony, with that of the four years sueeeeding, that is, during my sojourn at Ceylon in 1845-6-7 and 1848, will show a diminution of so mueh as 10 per eent. per annum; and that a eomparison of the number of *cures* at these different periods named, will show an inerease of 20 per eent. per annum. These results have been obtained from doeuments in the keeping of the Prineipal Civil Medieal Offieer, and are therefore not very likely to be exaggerated.

sistence, and of a deep yellow colour. Fluid is often seen effused under the dura mater, lying in contact with it and the arachnoid; and this latter investing structure is occasionally much thickened, and assumes an appearance like that of an entire sheet of tendon, of variable thickness, from that of a piece of common writing-paper to the same of chamois leather.

The brain itself does not generally present morbid appearances so easily cognisable by our senses as its membranes; a circumstance to be accounted for, doubtless, not only by the exceeding delicacy of the structures involved in diseased action, or rather in its consequences, but also by our imperfect acquaintance with the original and healthy organic conditions of the parts concerned. However, it is found not unfrequently much congested and of a dark colour, whilst at other times the cerebral mass presents a pale and exsanguine appearance; the consistence of the brain also is no less variable than the vascularity and colour of the organ.

That the disorganizations above enumerated are the result of inflammatory action of the parts involved, there cannot be the slightest doubt; but that these are NOT so often the *cause* as the consequence or *effects* of mental disorder, we are thoroughly convinced.

All those cases, which owe their origin to a *physical* cause, are certainly inflammatory in their nature, and depend mainly on an increased vascularity

of a particular portion or portions of the brain, but it is far otherwise with those cases of insanity induced by *moral* causes, so to speak.

If symptoms of insanity occur in the course of acute febrile diseases or rheumatism, or succeed to a blow on the head, or, in fact, attend on any case either of spontaneous or acquired, that is, of idiopathic or symptomatic inflammation of the brain or its membranes, there is then good reason to infer the diseased cerebration or mental disorder to be the direct effect of such inflammatory condition of the parts within the cranium; whereas if the disease (insanity) succeed to a severe and overpowering moral impression, to any great disappointment or alarm, or to outraged feeling of any kind involving a sudden, unexpected, and violent shock of the nervous system, through the medium of any portion of cerebral matter, then are we disposed to attribute the phenomena observed *not* to inflammation, but to *nervous irritation* of the ultimate structure of the brain, including the sensory fibres of the cerebrum,—the afferent and efferent fibres of Foville.

If such an abnormal state of the cerebral mass remain unrelieved, nothing is more likely than the occurrence of inflammation of the brain and its membranes: a state of things which takes place generally in the progress of lunacy in the most stealthy and insidious manner, and which, therefore continuing unchecked, almost necessarily induce those *palpable*

disorganizations of structure, effusions, &c., we have above noticed. Such, we repeat, are, more frequently than otherwise, the effects of *insanity* and NOT its first *cause*.

The intimate connexion and mutual dependence of the nervous and vascular systems throughout the whole organism, must prepare the pathologist to expect that disease of any kind affecting the former must eventually include the latter.

If every single thought and feeling be associated with certain physical and molecular changes in some part or parts of the brain, then does every case of mental disease, attended with increased action or excitement of the cerebrum, involve an undue and abnormal repetition of such *physical and molecular changes*, and this continuing to increase in intensity and extent, so affects the vascular condition of the brain and its membranes, that to it, at length, we become indebted for the said altered structures, effusions, &c., &c.

It should be remembered that the insane are very liable to chronic inflammatory affections, and that these generally assume the same asthenic character which belongs to peripneumonia, enteritis, erysipelas, &c., &c., when occurring in nervous and irritable subjects; the brain and its investing membranes, of course, partake of the susceptibility common to the whole body; and in them it may be very properly assumed that the cranial contents are even more likely

to be affected than other portions of the animal organism.

Insanity, like asthma, pertussis, angina pectoris, &c., has been too generally treated of as dependent on an inflammatory origin. In fatal cases of either kind, appearances are certainly presented to the senses which are caused by inflammation; but that such are, in the majority of instances, but the mere effects of disease is to our mind most true.

The accession of mental disorder, its history and progress, the kind of treatment found most effectual, and the nature of the lesions discovered after death, are in every way confirmatory of the view here taken. A careful investigation of these several points is alone necessary to the removal of any doubts on this head.*

* The author is vain enough to believe that the recognition of the above views and principles of cerebral pathology is alone necessary to rid medical science of the contradictory statement put forth by such men as Bayle and Calmeil, Jacobi and Foville, Prichard and Solly. Whilst the first named (Bayle) regards the cerebral membranes as the seat of mental disorders, the second (Calmeil) teaches us that the brain itself is affected. Jacobi locates the cause of madness in the abdominal viscera.

Not only has a question been raised concerning the organs primarily affected in insanity, but even the colour and consistence of different parts of the organism have been dragged into the controversy, and as it would appear, to strengthen only preconceived opinions or theories. Foville assures us, that in cases of acute mania, the cortical or gray substance of the brain is of a deep red colour; whilst Mr. Solly says, that in the same form of disease, viz. acute mania, the cortical or gray substance presents a dark or plum colour. In dementia and general paralysis, Prichard describes the

We have in our last Report mentioned the necessity of providing the necessary accommodation at the new Lunatic Hospital, for the many insane now at

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same structure as presenting a "*colour more brown than usual;*" and Mr. Solly, on the other hand, declares the cortical substance in dementia to be of a light colour. Nor does the incongruity of cerebral pathologists end here, for the "*paralysis of the insane*" is referred by three different authors (and each one of good repute) to as many distinct abnormal conditions of the brain; viz. by Calmeil, to an inflammation of the pia mater, and its consequent adhesion to the surface of the convolutions; by Foville to a hardness of the medullary part of the brain, consisting in a morbid adhesion of the cerebral fibres to each other; and by Prichard, to a *softness* of the cortical substance.

A residence of nearly four years at Hanwell, from 1840 to 1844, put it in my power to test the accuracy of the above opinions. I must add, I have looked in vain for either one of the coincidences specified. In 1843 I wrote these words in the pages of the 'Zoist' (vol. i), and after the experience of five additional years, I repeat them in the same tone of confidence as they were then composed. "The attempt to prove the invariable connexion of any particular alteration of structure of either the cortical or medullary substance of the brain, with individual forms of diseased cerebration and its complications, is no less absurd than the idea of associating impaired muscular movements, such as obtain in chorea, or ordinary paralysis with a disorganization of the muscular fibres exclusively, &c. . . . For the integrity of not only the several muscles is indispensable to a state of health, but also that of the nerves distributed to them. The latter are of course but parts of one whole, and the normal condition of both is required for their combined function. And precisely the same may be said of the various parts and structures of the brain; of the cortical and medullary substance; of the motory and sensory fibres, or, as Foville has designated them, the efferent and afferent fibres, &c. We must not either forget the investing membranes; their integrity is no less essential to sanity than is that of the pericardium to the healthy action of the heart. I wonder this mutual depend-

the jails at various out-stations. To the observations therein made, we would refer the attention of the reader. The erection of additional wards is of the

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ence never occurred to Calmeil, Bayle, Solly, and others; and cannot help thinking it almost impossible for any medical man, well acquainted with the nature and peculiarities of the various forms of abnormal cerebration, to entertain adverse opinions to those contained in this paper; but so it is. . . . It should be remembered that attacks of insanity, even recent ones, are occasionally not only as sudden in their occurrence as those of neuralgia, hysteria, &c., but are also no less temporary, and equally severe, comparatively speaking; and, like the last-named diseases, may be either idiopathic or symptomatic; and, moreover, that it is among the effects of a severe hemorrhage, or loss of blood, and is then to be cured only by the removal of its cause. How could all this happen if it depended purely on an *inflammation* of any part of the brain or its investing membranes?"

Regarding insanity as an affection rather of the nervous than of the vascular structure of the brain, and viewing the disorganizations observed in the light of effects only, or accidental complications, we can then easily account for the various opinions expressed by Calmeil, Bayle, Georget, Foville, Prichard, and Solly; and, at the same time we are, in every way, prepared for the very opposite experience of Pinel, Haslam, and Esquirol. The first-named, Pinel, says Dr. Millingen, clearly declares that in the examination of the brains of the insane he never met with any other appearances within the cavity of the skull than are observable in opening the bodies of persons who have died of apoplexy, epilepsy, nervous fevers, and convulsions. Haslam, whose experience in this matter was also very great, asserts that nothing decisive can be obtained, in reference to insanity, from any variations of appearance that have hitherto been detected in the brain. The opinions of Pinel and Haslam are confirmed by Esquirol, in these words. He says: "The inspection of bodies of lunatics offers numerous varieties as to situation, number, and kind of morbid appearances. The lesions of the encephalon are neither in relation to the disorder of the mind, nor to the maladies complicated with it. Some

first importance. We can see no necessity for building either workshops or houses for the native servants and their families: every pound so expended we should consider an absolute and inexcusable waste of the public money. The former cannot be needed, seeing that there is no kind of employment found for the insane; and, moreover, the unusually large size of the galleries may very properly be regarded as affording every facility, even if the patients had occupation found them, as we have recommended in these pages. The latter are highly objectionable, and contrary to the proper management and direction of a lunatic hospital; for the attendants require to be near at hand, and in hearing of the patients night and day: they should sleep in the galleries near to the doors of the sleeping apartments, and the *overseer* should be allowed a single room for his exclusive use. The families of no native attendants can be allowed on the premises without risking very much the comforts

lunatics, whose mental and bodily disease had given suspicion of extensive organic lesions, have presented but slight changes of structure in the brain, while others, whose symptoms had been less severe, have been the subjects of great and numerous alterations. But what disconcerts all our theories is that, not unfrequently, even in the instance of patients who have passed through all the stages of insanity, and have lived many years under derangement, no organic changes whatever have been traced, either in the brain or its containing membranes." He wisely adds, "What shall we then think of the rash pretensions of those who assume that they can fix upon the diseased portion of the brain, judging merely from the character of the disease?"

and well-being of the patients. At Hanwell the attendants of each ward occupy a room therein; and in case of any disturbance occurring, or illness, &c., they are at hand to render the necessary attention, or to summon the requisite assistance.

Such being our opinion, we have never felt ourselves at liberty to act as required in the following quotation from an official letter addressed to us by the Principal Civil Medical Officer: "I have the honour to request that you will immediately state the actual want of accommodation for the servants and families," &c.

As this Report will most likely be our last, we may be allowed to express a hope that the contents of this one, no less than those of the two preceding, may assure the Government of Ceylon that we have neglected nothing of very great importance—"*necessary to elucidate the mysterious maladies of the mind, and to prove by experience the means used for the restraint of the lunatic,*"—to use the words of the Principal Civil Medical Officer, contained in the official communication wherein these several annual Reports were called for.

We hope that whatever impulse forwards our own endeavours may have effected, either directly or indirectly, such might not, at any future time, be allowed to exhaust itself; but, on the other hand, we trust that the insane may continue to receive that kind sympathy, protection, and care they so fairly

claim, and which we have done our best in Ceylon to make sufficiently apparent. Let those who doubt this much, compare the *present* condition of the insane at Marandahn with their *past* at Hendelle, in December 1844, the period of our arrival in the colony.

Res non verba quæso.

N.B. The reader should be informed that, inasmuch as the preceding Report was written some months before it was due, and in anticipation of my leaving Ceylon forthwith, the subjoined "*remarks,*" the original of which appear on the Sick Return for December 1848, are rendered necessary to its completion; in fact, such should be regarded in the light of an *appendix* to the same.

EXTRACT FROM THE "SICK RETURN" FOR DECEMBER.

"The conclusion of the present (the first) *year* (1848), it may be thought, calls for some noticc of the experiencc therein furnishcd, in so far as thc interests and well-being of the insane at the new hospital at Borelle are concerned.

Various opinions have at different times been expressed concerning the *site* of the Lunatic Hospital, and the preference has been given, for the most part, to the higher land to the back of the Cotta road, that occupied in part by the Jail; however, the only way, I apprehend, to decide thc question which has been raised concerning thcse two localities is by a reference to the amount of sickness, and to the proportion of deaths occurring in either onc of the establishments named, when compared with the same in the other of them; reserving, however, a propcr attention to all other causes of health or disease which may obtain, such as diet, clothing, exercise, &c.

The *observations* appended to previous monthly returns to the Principal Civil Medical Officer's department will show how great has been the immunity of the insane from the ordinary discases of the country, by which I mean *fever* and *dysentery*; and that whilst the number of sick at the new Lunatic Hospital has generally varicd from 2½ to 6 per cent., that at thc Jail has scldom been below 9 pcr cent.,

but *commonly* so high as 12, and even 18 per cent. I have a letter from Mr. Green, the Governor of the Jail, in my possession, which corroborates the statement here made. It is worthy of remark, that whilst for many successive weeks *lately*, it has not been found necessary to order a single dose of medicine for a patient at the Lunatic Hospital, excepting for the relief of mental disorder, the sick ward of the Jail has contained from twenty-two to thirty inmates, labouring under *fever* and *dysentery* principally. So much for the comparative healthiness of the two situations.

The *mortality* among the lunatics (though fearfully high,—twenty-one deaths having occurred among an average number of fifty-six patients, viz. 35 + per cent. per annum,* and thereby offering a sad and humiliating contrast to the experience of previous years, viz. 1845 and 1846, wherein the mortality was successively reduced from 33·3 per cent., for so it stood in 1844, on my arrival in Ceylon, to 23+ and 15 per cent.), has been, for the most part, independent of the *diseases* which have prevailed among them, and therefore not caused by ordinary sickness peculiar to the locality,—sixteen out of the

* It is seen by the above, that the mortality among the insane at the *new Hospital* has this year (1848) exceeded by about 2 per cent. what it was in 1844 at Hendelle. However, it may be, I think, confidently anticipated that the mortality of the lunatics will never again reach the fearful height it did at the old Leper Hospital at Hendelle in 1843,—viz. 60 per cent. per annum.

twenty-one deaths having been plainly referable to the occurrence of *"general debility,"* which implies a gradual yet certain decline of all the vital powers, without appreciable disease of any kind.*

Of the *four* fatal cases of *dysentery,* one was, a short time previously to his decease, *admitted* in a *"wretched and half-starved condition,"* he died almost directly, on the occurrence of dysenteric symptoms, from pure exhaustion; and two more were so weakly and delicate, mere vegetating beings, that recovery could have been under no circumstances fairly anticipated.

I am informed that at the Jail "the number of cases proving fatal during the present year, commencing April 28th (the date of the first death), is thirty-one, out of which twenty-six have been decided *dysenteric* cases, four have been *diarrhœa,* and one *apoplexy.* The average number of prisoners in confinement at the Jail has been about 265,—so that the rate of mortality is not only very high, particularly as occurring among *sane* persons,—but inasmuch as they have the advantage of a liberal diet, the dysentery, &c. must, in their case, result from causes *"peculiar to the locality."* †

* The probable *cause* of this frequent *"general debility"* is elsewhere shown to consist in the *"unvaried diet"* provided for the inmates of the Lunatic Asylum.

† It appears on inquiry, that the dysentery prevailing at the Jail is invariably preceded or accompanied with distinct febrile symptoms.

But in instituting an inquiry into the comparative *sickness* and *mortality of the inmates of the Wellikadde Jail and those of the Lunatic Hospital,* it must *never* for a moment be forgotten, that the *sane* are not only very much less susceptible to the ordinary causes of diseased action in the body than the *insane,* and therefore commonly escape the consequences of exposure, &c., when the lunatic does not, but falls prostrate, stricken with fever or dysentery, &c., as the case may be; but what is more, the authority of the best statists goes to show that the *mortality* among the sane is NEVER, *unless under very extraordinary circumstances,* so high as that common to the *insane.* That *insanity* has a decided tendency to shorten life is proved in a very able paper by Mr. Farr, read before the Statistical Society of London, on the 13th of March, 1841, entitled, "A REPORT UPON THE MORTALITY OF LUNATICS."

This gentleman writes: "We have no means of ascertaining the mortality of lunatics at large; but the mortality of lunatics in asylums is much higher than the mortality of the general population; and the excess," he adds, "cannot be ascribed entirely, although it may partially, to the confinement, the unwholesomeness, or the usages of madhouses. The mean age of lunatics in asylums is about 35—40." Mr. Farr thus proceeds: "The annual mortality of severe cases of insanity cannot, I think, *in the most favorable circumstances,* be less than

6 per cent.; so that *the mortality is three times greater among lunatics than among the general population at the same age.*" The same writer tells us that the excessive mortality among the insane is ascribable mainly "*to the extraordinary and disgraceful fact, that a large number of patients are sent into an asylum, as it would seem, to die.* . . . There is probably a tendency to send dangerous cases, or cases in their most critical stage, to public institutions." Three of the deaths at the Lunatic Hospital in the past year, 1848, occurred to those who when admitted were "*miserably emaciated, and apparently half starved.*" The other causes of *the excessive mortality among the insane* mentioned by Mr. Farr, are—

"1st. The *diseases* generated by the limited space in which the unhappy lunatics are confined, &c.

"2d. The collection of large numbers under the same roof.

"3d. The impurity of the atmosphere.

"4th. The want of exercise and warmth.

"5th. A poor *and unvaried diet,*" &c.

The conclusions to be drawn from the foregoing "*observations,*" the result of the first year's occupation of the new asylum are,—

1st. That the *site* is plainly not open to the objections which have been offered to it.

2d. That *its* manifest advantages over that (the site) occupied by the Jail, are made apparent by the much greater immunity of the *insane* from the

ordinary discases of the climate than thc prisoncrs therc confincd; and,

3d. That the high rate of mortality among the lunatics since their occupation of the ncw building must be ascribed to another cause than that involvcd in the locality of the asylum.

It should be borne in mind, that whilst the number of *deaths* among the insanc from January to July inclusive amounted to *twelve*, that from July to December inclusive did not excced ninc, the average number of patients remaining ncarly the same, viz. *fifty-eight* and *fifty-three;* and that but *one* patient died during the last quarter of the year, that is, in the months of October, November, and Deccmber. It should also be remembered, in connexion with the above facts, dcmonstrative as such are of so considerable and progressive a diminution in the per centage of mortality* among the insane at the new Lunatic Hospital in the course of the same year; that in March last, the produce of the garden became for the first time available for the patients; it afforded them then a supply of vegetable food, including beans, pumpkins

* It is seen from the above, that the number of deaths among the insane during the *six* months just now passed, amounts to 17 + per eent. per annum, being but 2 per eent. above the mortality in 1846, that is, anterior to the introduetion of the new dietary; but the experienee of the last quarter (that ending in Deeember) is highly eneouraging, there having been but one death, whieh is equivalent to about 7½ per eent. per annum, and I eannot but assoeiate this faet with the inereased quantity and variety of food found for the insane from the produee of the garden.

brinjall, &c. once weekly; but from July to the present time the agricultural success of the patients at Marandahn has been such as to afford them vegetables so often as twice or thrice weekly, in addition to the *beef* and *rice*. The medical sub-assistant informs me that on the days when vegetables are served out, the patients *then* eat their *rice*, whereas, at other times it is very commonly refused; and from all which it may be concluded,—

4th. That a fair balance of the evidence *pro* and *con* goes to show the said *"high rate of mortality"* is to be referred to the *"unvaried diet"* (FARR), which has been or was provided for the general use of the insane poor, inmates of the new hospital.

5th, and lastly. That had the new dietary for the insane, established in July 1847, included the necessary vegetables and fruits so earnestly recommended (see correspondence and Reports), and which are AT THIS TIME cultivated on the premises of the new Lunatic Hospital, for the use of the patients, THEN would the temporary and alarming increase in the number of deaths, recorded in the end of the past year (1847), and in the first part of the present year (1848), *never* have occurred.

On *Christmas Day* last the patients were afforded much gratification by the indulgences then allowed them, and from which no one patient, either European or native, was excluded by indisposition of any kind. It was no trifling satisfaction to notice the

healthful animation and pleasure with which the majority of them received the *extras** provided for them.

The effects of this mark of attention and care were on the few disposed to be irritable and noisy eminently soothing and beneficial, whilst on the dull and apathetic they acted as an agreeable exeitant, and so called into operation those faculties otherwise subdued by disease or enfeebled by disuse. Among the good results of such little treats is the kind feeling it encourages in the minds of the insane, both towards each other and the servants and officers of the establishment; a circumstance which is of the highest importance in a lunatic hospital, and one better calculated than anything else to preserve in active operation those higher sentiments of our nature upon which the well-being of insane persons so certainly rests.

The occasional festivities at *Hanwell* and elsewhere in Europe practically demonstrate the above observations here submitted.

* These "extras" comprise rice-pudding, and fruits, as the plantain and pine-apple, with a plentiful supply of ginger-beer. Cigars and betel were liberally distributed. Thc tom-toms and erackers complcted the list of festivities, and added not a little to thc gencral good effect.

POSTSCRIPT.

POSTSCRIPT.

Inasmuch as my secession from the Government service of the colony (Ceylon) has been so long and unexpectedly delayed—pending the arrival of the Secretary of State's rcply to the Governor's proposal to abolish my appointment in the Civil Medical Establishment, and the terms thereof, &c., I am enabled to make the following addition to the preceding pages.

The charge of the Lunatic Hospital was continued in my hands until March 1849, and I here submit the first quarter's Rcport of the said institution. By referring to the former Report, it is seen that there were remaining in the hospital on December 31st, 1848, 55 patients; the number under treatment on the last day of March 1849, was 53, and the difference thus shown is referable to—first, the admissions, of which there have been three, second, the deaths; and in so far as these are concerncd, it is with much pleasure I have to record but *one* only, and this one was the act of a suicidal maniac, a patient, the subject of long-standing chronic mania,

whose every-day habits and pursuits were those of a quiet, inoffensive, and industrious person, and from which it may be inferred, that the destructive tendency in him was no less sudden than its gratification; in cases where the propensity to suicide occurs thus unexpectedly, the chances are, the patient will defeat his physician's best attention, however much he may be on his guard to prevent the occurrence of such unhappy casualties;* and to, thirdly, the discharges:† these have been on the whole satisfactory, so many

* At page 171 of the last Report, it will be seen I have urged the necessity of the Resident Medical Officer at the Lunatic Hospital being a *European;* that the native gentleman at present in office, and who has the high privilege of enjoying the *patronage* and *protection* of the Principal Civil Medical Officer, has outlived the *reasonable* confidence of his patients and friends, is shown by the fact that, when he—the Resident Medical Officer—was shown THE HANGING PATIENT, he did NOT cut the poor man down, but actually sent a distance of two miles for his medical superior to come and do as much for him.

† Among the discharges in the present year was one very interesting case, that of a male patient, a native of Ceylon. When admitted he was wretchedly emaciated and enfeebled, and very restless and excitable. His mind was tormented by the most miserable forebodings of evil; and altogether his condition was the most abject and deplorable I ever saw. He suffered also from aggravated dyspepsia, indicated principally by a dirty and loaded tongue, depraved secretions, and an occasional tenderness of the epigastrium. My first care was to put the digestive apparatus into good order, for which purpose I directed the daily use of pills composed of pil. hydr., pil. rhæi co., and p. scammon.; afterwards he took quinine and carb. ferri. Sedatives, as morphia, were given as required at night, and his diet was properly attended to throughout his illness. When he had sufficiently improved he was encouraged to employ himself, and to walk out night and

as four having been discharged *cured* within the three months.

It is with much pleasure I notice the continued healthiness of the inmates of the new Lunatic Establishment at Borelli; whilst fever and bowel complaints have been more than usually prevalent among the native population, since Christmas, in and about Colombo, the insane have enjoyed an almost

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morning. When discharged he appeared a stout athletic man; his gratitude is unbounded.

Some time since I was consulted concerning a high-caste Indian—a Chitty—who presented, in many particulars, much the same condition as the last patient. This poor fellow had been most unmercifully bled, each accession of mental excitement had been met by "more leeches," "more leeches," but, as may be expected, this treatment had been attended with no advantage. I put him on a tonic plan, and sent him from his home; he soon recovered.

A little girl, aged 14, for some months insane, and who was treated ANTIPHLOGISTICALLY by an *eminent* member of the medical profession in Ceylon, was brought to my notice. Pills of pil. hydr. and aloes, and ext. hyoscyam., at night, an occasional shower-bath, with the internal use of carb. ferri and quinine, restored her to excellent health. The catamenia made their appearance, and *so* terminated her mental disorder. At Hanwell I found such cases as common as possible.

It need hardly be added, that in the treatment of cerebral disease, like that of abnormal action affecting any other organ of the body, the conduct of the practitioner should be directed by precisely the same general principles of pathology. Excessive power or action does not imply, always, an increased vascularity of the part affected; and even when it does so, this *increased vascularity* is as often as not dependent on and caused by disease, or irritation of the nerves of the part; for the relief of which bleeding is not commonly admissible.

incredible immunity from all diseases, of whatever kind. The Jail, already so much dwelt on in these pages, has had a large number of its prisoners attacked with fever and diarrhœa, and all this in spite of the excellent diet provided for them; a fact this which proves, and abundantly too, the contents of the preceding Reports contained in this volume, and not less so, the passion and the prejudice of my opponents, who at this time are not only slowly adopting my views and practice, but what is more, are making futile efforts to claim the authorship of many of my suggestions, seeing that these are more than likely to become appreciated, and that I am on the eve of leaving Ceylon for England. It is no small satisfaction to my mind, to feel that I have converted even my enemies to *reason* and *humanity*; may they live long to labour in the good cause, if it be only to counteract the little mischief they may have effected. However much it may have been hoped, though in vain, to *"filch from me my good name"* in Ceylon, yet will I not allow any one to claim, with impunity, the merits of that success the Principal Civil Medical Officer and his *confrère* were so instrumental in delaying; and that they were so, let the contents of these pages testify.

Among the many difficulties which present themselves to the medical officer in charge of a lunatic hospital, there are, I believe, none more perplexing and troublesome than the refusal of food by those

among the insane intent on self-destruction. One sueh ease has occurred within the present year at the Lunatic Hospital at Borelli. In the majority of instanees of this kind, if thc patient be treatcd with kindness and encouragement, and a proper and beeoming sympathy be offered, and due attention given to the predominant mental hallucinations, then will the patient readily eat and drink as usual. I have very often observed insane patients refuse to take their food when in the company of other persons, but eat and drink with avidity when *alone.* There were several among the female patients at HANWELL who would eat only on the sly, when they chanced to meet with food in some out of the way corner or eupboard; and in thcse, I need hardly add, the organs of *acquisitiveness* and *secretiveness* were always above par. The gratification of the dominant pro-pensity may be relied on to obviatc any difficulty or anxiety such cases might otherwisc present.

It not unfrequently happens that the refusal of food by the lunatic is a mere indication of gastrie disorder, in some shape or the othcr. I have very eommonly found the disinclination to eat cease directly on the employment of some purgative mcdi-eine, and at other timcs I have found a ehange of diet all that was requircd to rcstore the inelination to takc food. However, it does now and then happen, that in spite of everything, the paticnt obstinately persists in refusing all kinds of sus-

tenance; when this happens, and there is no reason to apprehend the existence of fever or gastric disease, &c., whereby the patient is rendered physically noxious to food and nourishment, then is our only effectual aid to be derived from the employment of the stomach-pump. About two years since I was called by Drs. Willisford and Scott, of Colombo, to a gentleman suffering from an attack of acute mania. When I saw him, he was reduced to almost the last extremity, in consequence of his obstinately persisting in his refusal to eat or drink; and, as is usually the case in attacks of recent and acute cerebral disorder, the violence of the symptoms had increased and kept pace with the indications of vital exhaustion. The forcible injection into the stomach of strong beef-tea and chicken-soup, &c., including bottled ale and porter, had the effect both of reducing the maniacal symptoms, and of effectually relieving the threatened collapse. Mr. —— recovered in some five or six weeks, and proceeded to England. I have met with similar cases.

But the employment of the stomach-pump, on the person of a violent maniac, bent on offering the operator all the opposition in his power, is a proceeding *not* to be lightly dealt with: in the case just mentioned, I experienced some difficulty in introducing the œsophageal tube, although well and ably assisted by my colleagues, as well as by some six or eight athletic Europeans. To force open the mouth

of a maniac against his will I have ever found more or lcss troublesome and difficult; and on two occasions of the kind, out of about five and twenty, I have failed of success, that is, for the time being. I was once consulted about a young woman, who, at the time, was subject to occasional paroxysms of violent mania of some duration, during which she invariably refused to take food of all kinds; as each succeeding attempt made by her medical attendants to force open the mouth, for the purpose of conveying nourishment into the stomach, had failed, they determined to overcome the difficulty by extracting or breaking the incisor teeth; and that they thereby effected the object in view is most true, but I very much doubt both the propriety and humanity of such treatment.

To wait for the physical exhaustion or collapse consequent on inanition, and then to use the stomach-pump, would be, of course, to place the life of the patient in much danger; and therefore is such a plan of treatment, or rather of *no*-treatment, not to be thought of: and without stopping to inquire into the propriety of using nourishing injections *per ano*, I would submit, that whatever resistance may be offered by the patient to the use of the stomach-pump, may be effectually overcome, even in the most aggravated cases of the kind, and without either extracting or breaking the teeth, or incurring the necessity of any kind of delay, by

the employment of the *screw gag,** or rather of Mr. Newington's syringe—an ingenious and highly practical invention, designed, as that gentleman has explained, "to introduce fluids into the stomach *during a closed state of the teeth,* in cases where maniacs obstinately refuse sustenance."† Of course the grand object to be kept in view in the management of these cases of refusal of food requiring instrumental interference, is the employment of as little compulsion or force as possible, or found compatible with the relief of the patient.

It may seem to the minds of those accustomed only to the employment of coercive means, and used

* This "*screw gag,*" as I have here called the instrument, has, no doubt, in times past, been much abused. It is an invention of much power, and when judiciously and discriminately used, of no inconsiderable value. It is, I conceive, very much better adapted to force open the mouth of a refractory maniac than an ordinary gag of a more simple construction and with less pretensions; and, therefore, *on the score of humanity* is it, the "*screw gag,*" to be preferred.

† This instrument consists of the adaptation to one of Read's patent syringes of "a hollow metallic pipe, bent at the extremity into a crescentic curve." The following are Mr. Newington's directions to use the same, viz.: "The curved metallic pipe is to be introduced into the corner of the mouth, and passed along between the teeth and the cheek, the shaft of the pipe parallel to the front teeth, the point inclining downwards towards the gums, and in this direction the extremity slides into the space behind the last molar tooth, and is projected into the mouth by the pipe being brought to a right angle with the lips; a slight elevation of the instrument fixing the hook firmly behind the dens sapientiæ of the upper jaw." This being done, the end of the pipe is to be inserted into the brass socket at the extremity of

only to the contemplation of physical violence, regarded as a means of control or direction of the lunatic, and therefore uninformed of, and without experience in, those more exalted and moral means of cure so indispensable to the success realized by the modern practitioner engaged in the treatment of mental disorders—it may seem, I say, to such persons, a very trifling matter, this instrumental proceeding, but certainly it is not unattended with danger.

Some time since I saw a very skilful practitioner fail in his efforts to introduce the œsophageal tube; the patient accidentally commenced struggling just as the point of the instrument was entering the gullet, and as a consequence it, the tube, was pressed some-

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the flexible tube, and the patient being placed on a bed, an assistant inclining the head backward, and keeping it steady, at the same time compressing the nostrils with the finger and thumb, the operator proceeds to pump in the liquid. Upon this part of the operation Mr. Newington makes the following remarks: "The fluid propelled by the syringe, striking upon the velum pendulum palati, falls upon the root of the tongue, near the glottis, and the nostrils being closed, the patient is driven to the necessity of breathing by the mouth, previously to which the fluid must be projected, by the action of deglutition, beyond the epiglottis into the pharynx. The fluid should be injected in small quantities, not exceeding a tablespoonful at a time, the operator waiting between each jet, until he has ascertained that the previous portion has been swallowed; and of this he may be assured by observing the elevation of the larynx, as also by a slight murmuring sound, occasioned by the act of swallowing. In this cautious manner, a pint, or even a quart of fluid, if necessary, may be administered in a very short time, unaccompanied by pain or nausea, and without affording the patient the capability of rejecting any part.

where against the posterior and bony parietes of the mouth, and so became twisted or bent up in some way or the other, in the pharynx. The sudden occurrence of alarming suffocative symptoms, led to the withdrawal of the instrument, when the nature of the accident was revealed. I know of another case in which the struggles of the maniac to resist the use of the stomach-pump were so troublesome and violent, that the instrument entered, not into the œsophagus, but into the trachea, and the injury thus effected caused the death of the patient. Dr. Conolly has thus expressed himself in reference to the use of the stomach-pump in cases of refusal of food: "*Upon the whole, all additional experience strengthens my unfavorable opinion of instrumental means in such cases. Their advantage is limited to a small number of them; they have an unfavorable influence on the patient's mind when often resorted to, and their employment is by no means free from danger in weak and violent patients.*"

For the lunatic to refuse his food is the exception to the rule; generally he is prompted to eat and drink heartily, even voraciously; an instinctive act this, like that which not unfrequently, in the advanced stages of *fever*, &c., generates so keen a desire and relish for whatever is best suited to the peculiar requirements of the patient's case. So greedily do many insane patients eat, that it now and then happens they choke themselves; a portion of the food

beeomes impacted in the pharynx or œsophagus, and requires the use either of the foreeps or probang. At Hanwell I found that those patients afflieted with "*general paralysis*" werc, as may be expeeted, more liable than those who were not, to aecidents of this kind, and so also of those subjeet to epileptic paroxysms. However, it should be rememberсd by those having the eare and proteetion of the insane, that they are sometimes attackcd, in virtue doubtless of the altered and abnormal condition of the whole nervous organism, with a kind of hysterieal dysphagia; or what is the same thing, a peculiar spasm of the œsophagus, the symptoms of which are, "in faet, identieal with those which result from a permanent strieture of the gullet, or from the presence of a foreign body there impaeted,"* with this exeeption only; in the first, the dysphagia oecurs at uneertain times, and is of variable duration, from that of a few minutcs to sixteen or twenty hours, or even longer; neither of which faets obtain in the *dysphagia* produeed by the other causes named. Moreover, in nervous dysphagia, or in aecidental spasm of the œsophagus, relief is obtained generally by a full dose of opium, administered, if it be possible, by thc mouth, or in the form of an enema, to which tr. assafœtid. may be added with much advantage, or by a shower-bath, or through the agency of the mind; or, to writc more correctly, the *brain*: mcntal emotion,

* See Watson's Practicc of Physic, vol. ii, p. 335.

I conceive, may not only prove a cause, but a remedy, for many nervous and paroxysmal affections, including this one here considered, whereas in *dysphagia* caused by a stricture of the gullet, or resulting from the presence of a foreign body in the œsophagus, relief can be obtained only from the employment of either the bougie or probang.

Many interesting cases of spasm of the œsophagus, nervous dysphagia, are on record. The 'Medico-Chirurgical Review' contains the following case, designed to illustrate the reciprocal influence of the nervous and sanguiferous systems: "A young Creole girl, of an hysterical constitution, was seized with spasm of the throat, which for *two days* prevented her from swallowing anything. She was bled; and from the moment that the blood began to flow, this spasm gave way, and she could swallow with ease."

Boyer, who was, I believe, the first writer to notice the liability of insane persons to this peculiar affection, once met with a case of "*hysterical dysphagia,*" in which the "difficulty and dread of swallowing solid food" was removed by his "attending her at her meals, twice every day for a month, and gradually convincing her of the absurdity of her apprehension of being suffocated by attempting to swallow solid aliment," thus affording us an instance of the "*reciprocal influence,*" *not* "of the nervous and sanguiferous systems," as in the Creole girl, but of the cerebral (mental) and organic functions. Sir

Benjamin Brodie and Mr. Mayo are also the authors of similar examples of diseased action: the latter surgeon has met with "spasmodic dysphagia" in the male, and so also has the celebrated French surgeon BOYER.

Some little time since, one of the male patients at the Lunatic Hospital, then under my charge, was *suddenly* attacked with a painful and difficult deglutition, when partaking of some soup in which a portion of bread had been digested. It was thought possible that the œsophagus may contain a small piece of meat, or perhaps bone, and with this view, I wished and endeavoured, though in vain, to introduce the probang, but the patient's obstinacy and muscular resistance were such that, aided only by the effeminate natives of the country (Ceylon), I did not succeed in my attempts; but in thus failing to force open the mouth of a refractory and powerful patient, I did no more than realize what so great an authority as LISTON has prepared the practical surgeon to anticipate.* Emetics were given, but with no very marked effects. In about sixteen hours from the commencement of the attack the power of swallowing returned. Two paroxysms of *dysphagia* succeeded this one; and these, like the first, commenced and terminated in the same uncertain and capricious manner, "after the fashion of other spasmodic ailments."†

* See Liston's Operative Surgery.

† Watson.

Apropos: in the preceding pages are contained various facts, illustrative both of the false position in which I have been placed in Ceylon, in relation to the Senior Military Medieal Offieer, and of the unceasing prejudiee and hostility whieh have been manifested towards my appointment, and not less so towards myself, by him and his interested coadjutors and dependents. The abstract of the eorrespondence* here subjoined between Dr. Roe and myself may be considercd by the impartial reader, and to him only do I care to address myself, as an additional proof of the latter of the two positions named; and, as it refers to the case of "*spasmodic dysphagia*" just mentioned, no better opportunity than the present can offer for its introduction to the notiee of my readers. I should not deem it necessary to refer to the subject here, if the medical officer named had done me that justice the eircumstances of the case demand, not only on *private*, but on *public* grounds;

* The original contains much that is foreign to my immediate purpose; and therefore is it that I decline to tax the patience of my reader by any explanation of the querulous complaints made, both orally and by letters, by Dr. Roe, because his assistance was not sought in a case of so much "*emergency*" and "*danger*," and because I borrowed a pair of forceps of a brother practitioner, which were never used, and did not apply at the *Government Medical Store* for the instrument, whereat, in spite of the professions made, many highly useful and even indispensable medicines, instruments, &c., cannot be had, or my own private drug bill would not contain the various items it does, including *acet. cantharid.*, *biniodid. hydrarg.*, *chloroform*, *truss*, &c., articles purchased by me for the Government serviee.

nor am I without hope, that an exposure of this gentleman's official demerits may tend to the introduction of a better system of medical police in Ceylon, in the place of that cumbrous, patronal, and overpaid piece of machinery, which tends alike to the obstruction of science and of humanity.*

* It is high time the atteution of those interested in *medical reform* was directed to our colonial medical regulatious. The present arrangements do but provide for a successiou of old military gentlemen, far gone "*into the sear and yellow leaf;*" and who, as a geueral rule, carry with them the science of the *past* rather than that of the *present* century. Too old to learu, and most probably prejudiced against the views aud principles of practice of their juniors, the "Principal Civil Medical Officers" (so called) engaged in our colonies require to possess a large share of the *morale* to keep them from interfering with their inferiors in rank. If they do so, the chances are they get into difficulties, and then, chagrined at their own presumptuous folly, they lose no opportunity to annoy and persecute those subject to them. Such is au epitome of my four years aud a half experience in Ceylou; and such is by no means singular. I am glad to be able to add, that Ceylon is *now* being considered deserving of a better order of things; e. g. a Committee of Inquiry is now sitting. May they make a right use of the evidence before them, and may they *not* be prejudiced by the sophistry of the mere PLACE-HUNTER.

I may add, the separation of the military and civil medical services in Ceylon must precede every other change. Wheu Ceylon was a mere military station, and therefore without a population accustomed and inclined to peaceable pursuits, or when agriculture and commerce were comparatively unknown in the island, *then* could there be no necessity for the civilian, nor for civil institutions. Ceylon has, I conceive, long since passed that transition stage of existeuce during which municipal arrangements may be, at all times and in all places, very fairly anticipated; and the time, then, cannot be far distant when the Government may be expected to leave the direction of matters purely local in other

"Principal Civil Medical Office, Colombo;
25th January, 1849.

"Sir,—On visiting the Lunatic Hospital this morning, I was informed that an European patient

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hands than their own; but, pending this state of things, the local Government would do well to release the civil medical service from the thraldom of military misrule, and give to such who have "*a local habitation and a name,*" in preference to those who have *not*, the medical charge and responsibility of the civil establishments. With a reputation to make or to maintain, the civil surgeon may be most fairly expected to do his best to advance the interests of his department, and to lose no opportunity to prove the real value of his services; and so much can hardly be expected of the military medical man, who may be here to-day but gone to-morrow; whose aim and hope are promotion, and whose interests, therefore, are in his own service, and not in that of the colony he is called on to serve. My position may be thought to derive confirmation from the fact, that although Colombo has a civil hospital of *one hundred* beds, and has had for a period long anterior to the occupation of Ceylon by the British, yet has no use been made of this institution as a school of medicine; and that, therefore, the Government has been compelled to incur an enormous expense to qualify native gentlemen to enter the colonial medical service, by sending such to the Medical College at Calcutta. If the health, the lives, and the limbs of the native population of Ceylon are of any value or regard, why does not the Government make a law after the fashion of the Apothecaries Act of 1815, forbidding all unlicensed persons, in all the large towns, to practise medicine and surgery, and reserving to itself the privilege of granting the necessary licenses? Some educational scheme may be very properly insisted on, and the authority to practise withheld, if on examination the candidate be found unfit. This matter is, to say the least of it, worthy of the consideration of the Colonial Government; those only who have practised in tropical countries, can be at all aware of the frightful cases of malpractice which present themselves to the notice of the European in foreign lands—more especially to the *surgeon* and *accoucheur*.

in the hospital had on Sunday evening, the 21st instant, in attempting to swallow a bone with his supper, it stuck in his throat, and nearly terminated his existence, which was reported to you, and he was left that night without the necessary means being used for his relief.

"That you did not return before midday on Monday, and left the same patient a second time in a more dangerous state, without affording the slightest assistance, and this patient being eventually and providentially saved by the energetic means employed by Medical Sub-assistant Mr. Ebert, after you left him.

* * * * *

"I have the honour to be, Sir,

"Your most obedient servant,

"Sam. C. Roe, m.d.,

"Principal Civil Med. Officer."

"To Dr. Davcy,

"Supt. of Lunatic Hospital, Wcllicadde."

The preceding is, however improbable it may appear, a fac-simile of the original, but, as the sequel will show, its *literary* defects are the least objectionable of its contents. I informed the Senior Military, or Principal Civil Medical Officer in reply, that the Medical Sub-assistant named by him had offered me the most unequivocal denial of the asscrtions made concerning my conduct, on his authority. The following are quotations from my letter to Dr. Roe :—

"He says he did *not* tell you that I left that night" (meaning Sunday), "without the neeessary means being used for his" (the patient's) "relief;" "nor did he" (I am assured) "say that I 'did not return before mid-day, on Monday, and left him a seeond time without affording the slightest assistanee,' to quote your own words." I proeeeded to explain that the patient was suddenly attaeked, when taking some soup, with a painful and diffieult deglutition, whieh led those about him "to suppose" that something might be impaeted in the œsophagus, and that to aseertain if sueh was the ease, and to remove "the obstruetion whatever it may be," I attempted to introduce the probang, but was prevented doing so by the determined physieal resistanee of the patient;* that the ease presented "no kind of urgency, respiration being quite unaffeeted;" that, in the hope of subduing his great museular power, and be enabled thus "*to force open the mouth*," I employed "*chloroform*," but with no good effeet; that, under the cireumstanees named, I had judged it prudent to wait until the afternoon, in the hope and expeetation that "HUNGER† may have the effeet of indueing him to

* The individual alluded to was, at the time this easualty happened, and is now, a powerful and athletic European, the subjeet of reeent and aeute mania of the most severe kind.

† One remarkable feature in this man's insanity is his uneeasing propensity to eat and drink; his appetite is enormous, and what is of importanee, the more he takes the better he appears, both physieally and mentally. The organ of *alimentiveness* being among

submit to the neeessary treatment," and that the resident Medieal Sub-assistant, acting on my suggestion, and by my directions did then introduee the probang "*with good effect*," SO AT LEAST IT WAS REPORTED TO ME; however, the sequel will prove that this part of the treatment was *not* praetised, but that nevertheless the power of swallowing was at this time perfeet, as witnessed by myself. In addition, I suggested that inasmueh as the "*dysphagia*" had returned the sueceeding day, Tuesday, and had been relieved by instrumental means,* "*and that since he had eaten and drunk as usual*"—faets (?) which I ean but regard now as then, as incompatible with an inflammatory eondition of the mucous lining of the œsophagus (*œsophagitis*)—the case appeared as one of "*spasmodic dysphagia.*"

So ended my reply, but instead of being considered satisfactory, as I had anticipated, I reeeived for

the most aetive of the various eerebral faeulties, I look upon it as a eontrolling power to his other propensities, affeetions, &e.: and numerous are the opportunities afforded me of illustrating the praetieal operation of this position. A frequent pastime of this poor man is to write orders to the various mereantile firms at Colombo, for enormous quantities of wines and brandy, hams, piekles, sweetmeats, &e.; during mental exeitement he speaks of little else than eating and drinking, and if he does allude to his imaginary high and exalted position in the eolony, he is pretty sure to view it as a means of gratifying this one predominant inelination.

* The reader will pereeive, presently, that this faet is asserted on a very preearious authority; he will therefore aeeept it or not, as he may feel inclined.

answer that my "*statement*" did not alter in the slightest degree the facts first stated by him ! ! ! viz. "that a man in the Lunatic Hospital was nearly suffocated by a *bone* sticking in his throat ; that you immediately saw him and did not relieve him," &c. ; that *his friend,* "the Medical Sub-assistant, after you left the house on Monday," did bind the man, and "in the usual and decided manner, by the probang did force down the impacted substance," &c., that the case was *not* one of "*spasmodic dysphagia;*" and that my treatment of it was as "*unsatisfactory as ineffectual.*"

It is presently shown that this story of the "*probang*" and the "*impacted substance*" is a mere delusion.

I put the correspondence by with a determination to forget it; but not many days had elapsed ere my eyes were opened to the impositions practised on me by the Medical Sub-assistant in this matter, by even two or three of the patients, who, however insane, proved themselves sufficiently clear-sighted to perceive that I was the dupe of this person's native defects of character, and, what is more, to surmise that the frequent private conferences of the Principal Civil Medical Officer and him, on the premises of the Lunatic Hospital, foreboded little but mischief to myself; when, prepared with my facts, I wrote the following letter :

"SIR,—In answer to your letter dated 29th

January, 1849, I have the honour to state,—it is with much satisfaction I perceive you do *not* credit the charge of neglect and inattention made against me by Medical Sub-assistant Ebert, and conveyed in your letter dated 25th January 1849, in the following words, viz. 'he,' meaning the patient, 'was left that night without the necessary means being *used* for his relief,' and therefore you will allow me to add, the '*subject-matter*' of your first commmunication to me *is* very materially altered; that the means *then* used failed of *success* I do not deny.

"In the report of the case at issue, forwarded to you for your information, it is distinctly stated that there was no kind of urgency in the symptoms, the respiration being quite unaffected. Such, I repeat, is in every way true. Mr. M. suffered *only* from difficult deglutition, in all other respects he appeared in the same state that he usually is; he talked loudly, and gesticulated as insane persons under excitement are seen to do; had the respiration been affected, and had the case assumed an urgent character, my treatment would, of course, have been of another and more decided kind. That Mr. Ebert misinformed you, when he said that Mr. M. was, or had been, '*nearly suffocated*,' to quote your own words, is most true. Such an assertion is of no more value than that one which accused me of neglecting to *use* the necessary means for the relief of my patient. Why Mr. Ebert should have informed

you I did not visit the hospital until '*mid-day on Monday*,' as I learn from your letter dated Jan. 25th, I know not; but I may add, his subsequent contradiction of this part of his statement necessarily throws a doubt on each one of his recorded details. Your last letter contains this sentence: 'that Medical Sub-assistant Mr. Ebert, after you left the house,' on Monday, 'did bind the man, and in the usual and decided manner, by the probang, did force down the impacted substance, and gave instant relief to Mr. M.' &c. I have the honour to inform you, that all this violence, and much more which should have been avoided, was done, if at all, *not* on MONDAY, but on the morrow, viz. TUESDAY; and AFTER the power of swallowing had returned, and AFTER the patient had partaken liberally of nourishment; and by referring to my report of the case, contained in my last letter to you on this subject, and dated January 26th, you will find these words: 'I saw him,' on *Monday afternoon*, 'drink, with much ease and satisfaction, some wine and water, and partake of soup.' 'I considered the case at an end.' Mr. Ebert will best know his reasons for reporting to *you* that the means of compulsion he used were employed on the *Monday*, to *me* they were said to be practised on the day following, viz. *Tuesday*, and because the inability to swallow had that morning returned, and which my first letter confirms. That gentleman will also know better than I can, why,

when I read to him my reply to your first letter, '25th Jan., 1849,' he wished me to withhold the facts (?) of *Tuesday*, and to give them a place in *Monday's* proeeedings, and thereby, it seems, corroborate his statements to yourself, as shown in the letter to which this is a reply; however, his reasons I could not *then* divine. I have had a conversation this morning with the overseer, and he most positively declares that Mr. Ebert used the probang but *once*, and that that was on the *Tuesday*, and that then, and then *only*, was the patient coerced in any way. The case, then, would appear to stand thus, viz. a maniae is diseovered to be unable to perform the aet of deglutition on a Sunday evening; he refuses to allow the probang to be passed through the œsophagus; violent efforts are made in vain to force open the mouth by the medical officers of the establishment; emetie doses of *ant. tart.* are given, in the hope of dislodging the foreign body, supposed to be there impacted. In the absence of any urgent symptoms, the further treatment of the ease is deferred until the morrow (*Monday*), when the same means are again employed by the medieal offieers, and others more potent resorted to, but the great strength and obstinacy of the patient prevented the mouth being foreed open; small and repeated doses of *ant. tart.* are then given with the intention, not only of keeping up a gently nauseating effeet, and so dislodging the foreign body there suspected to be

present, but in the hope also of relaxing the body sufficiently, should further force be deemed requisite; directions being at the same time left with the resident medical officer to introduce the probang, if the patient should be encouraged to submit to the operation voluntarily. In the afternoon of the same day, the power of swallowing returns, no mechanical means having been employed, and the patient partakes freely of good soup, and wine and water. The case is supposed to be at an end, but on the next day *dysphagia* again occurs, though without any apparent reason, but certainly it is *not* caused by the presence of a foreign body *this time,* to relieve which the probang is *said* to have been pushed, after much trouble and violence, into the stomach, with immediate and decided benefit. On the *Sunday* following, the maniac is yet a third time attacked, *when eating his dinner,* but on being quietly spoken to and encouraged by the visiting medical officer, who happened to be present on the occasion, to eat slowly, and masticate his food well, and on being assured of the trifling nature of the attack, the symptoms passed off in two or three minutes, or in less time, and have not since returned; a week having elapsed. Castor oil is prescribed as an aperient, and the patient is ordered to be closely watched.

* * * * *

"If the contradictory statements brought home to Mr. Ebert seem to cast a doubt on his general

veracity in this matter—if Mr. Ebert has preferred to report to you that the forcible introduction of the probang was performed on *Monday* rather than on the *Tuesday*—if he (Mr. Ebert) has manifested no inconsiderable anxiety for me to withhold a correct information of the particulars of the case from yourself, and all of which is a matter of demonstration, then am I compelled to conclude, independently of whatever evidence might be adduced to the contrary, that the treatment I adopted is, or was *not*, so unsatisfactory and ineffectual, as it has been made to appear, and that '*the energetic means*' employed by Medical Sub-assistant Mr. Ebert, to quote your own words, Jan. 25, 1849, were not less cruel than they were ill-judged; that is, admitting even your own proposition, viz. that on *Tuesday*, when the forcible introduction of the probang was or is said to have been effected, '*the pain endured by Mr. M. was owing to the abrasure and injury done to the soft parts by the passage of a foreign body,*' &c. However, all past experience goes to show that, in no respect, can reliance be placed on the evidence of Mr. Ebert; and therefore is this censure intended only to be conditional.

"I doubt not you will perceive that from the first you have been misinformed concerning the case to which these observations refer, and that I have been most unjustly treated by or through your informant; for in having failed, in conjunction with Mr. Ebert, to force open the mouth of the patient, I can allow but

small blame to myself, inasmuch as the force I employed was measured only by my physical capacities.*

"Mr. Ebert's qualifications and integrity of conduct it would be painful for me to dwell on, but I would beg to refer you to a letter of mine addressed to yourself, bearing date October 3, 1847,† in which your interference is sought as a means of protection from his general neglect of duty and offensive

* Failures of this kind are common enough, in hospitals for the insane, with patients refusing their food; and therefore is it that many establishments for lunatics are provided with a peculiar kind of *screw* wherewith to force open the mouth.

† In this letter the following passages occur: "For a long time past he has, in all things, not only neglected to obey my instructions, but has offered me every kind of opposition and annoyance;" and having demonstrated this much by a series of facts, I proceed—"conduct like this, it is too evident, involves so gross an infringement of duty, that I feel it to be quite out of my power to avoid noticing it as I do. . . . . . So strange a mixture of impudence and equivocation I have never seen. . . . . . That Mr. Ebert has shown himself entirely unfit for the duties of the situation he holds, is most true; for that time has gone by when I did hope, either by conciliation, encouragement, or remonstrance, to render him a helping hand wherewith to work out the amelioration of the insane of Ceylon."

Instead of providing a successor to this person, as I requested the Principal Civil Medical Officer to do, upon the grounds stated to him, that officer, in acknowledging the receipt of my communication, and in commending the course I had taken in the matter, and in expressing himself satisfied of the guilt of Medical Sub-assistant Ebert, and of the "*impropriety and uncourteousness of his conduct, and the omissions of duties justly set forward,*" informed me, that he had desired Mr. Ebert to wait upon me and offer the necessary apologies and promises of amendment; and, moreover, that his father—*Dr. Roe's first clerk*—had assured *him*, "he

demeanour towards myself. The leniency which has been since that time shown towards him, by your advice, has failed to promote the good effects then anticipated.

"I have, &c.,

"J. G. Davey."

"The Principal Civil Medical Officer."

From the foregoing we are assured of not only the close partiality of the P. C. M. O. to his *parasite*, but of his incapacity to reason clearly on medical subjects, or he would have manifested greater caution in his selection and use of the premises above set forth.

The succeeding remarks may possibly throw more or less doubt on Dr. Roe's *diagnosis* and views of treatment.

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would urge his son by every persuasion and advice to conduct himself obediently, and to "*my*" perfect "satisfaction."

The reader is now in a good position to estimate the kind of support and protection given to me by the Senior Military Surgeon, as well as the nature of the assistance I derived from the medical officer placed under me.

I mention this, not so much in self-defence as *on principle*, and in the hope that this exposure may hasten the adoption of a better order of things. The appointment of civil medical officers from home is alone necessary to annihilate the military and colonial, or native (medical) monopolists in Ceylon; and therefore, in part, the determined hostility manifested to my office, it being the first serious encroachment on the old system. By *military monopolists* I mean only those of the army-surgeons who look on the *civilian* as an intruder and alien.

The *causes* of nervous dysphagia, that is, of spasm of the œsophagus, occurring suddenly, and without evidence of previous disease, inducing difficult and painful deglutition, are described by Copland as two-fold, viz. predisposing, and immediate or exciting. Among the former are mentioned,—"various nervous affections,"—"*hypochondriasis,*"—"particular forms of mania" (Boyer), &c.; and among the latter, —"dyspeptic affections,"—"and flatus rising into the canal, and causing spasm of one part, and dilatation of another part adjoining the former, particularly upon attempts at deglutition." Now the indications of mental disease in my patient were much aggravated by a torpid condition of the liver, and a disordered state of the *prima via,* whether idiopathic or symptomatic it matters not; moreover, the symptoms came on "*suddenly,*" and "*upon attempts at deglutition.*" (COPLAND.)

In enumerating the *symptoms* of œsophageal spasm, this author writes: "The symptoms vary with the part of the tube affected: when the spasm is seated at the top of the œsophagus and pharynx, then deglutition is almost or altogether impossible, and substances are forcibly ejected. When it is seated in the lower portion, then the morsel swallowed is arrested at its seat, and is either immediately regurgitated, or remains there for a considerable period, when it slowly passes into the stomach, or is violently ejected from the canal:" and Dr. Watson, in

his 'Lectures on Physic,' expresses himself similarly; and so also does BOYER, as quoted by the late Mr. Samuel Cooper, in his 'Surgical Dictionary,' in the article *Œsophagus.* In my patient it may possibly be inferred, that his first paroxysm was terminated by the morsel *slowly passing into the stomach,* after having remained some eighteen hours in the lower portion of the œsophagus; of the second it would be hazardous to speak; but with reference to the third, the intermediate periods of each being free from all symptoms of the kind, the arrest of the portion of food at "a certain distance down the gullet,"* that is, at the seat of spasm, was plainly indicated by its immediate regurgitation.

That the son of the *First Clerk* of the head of the Medical Department in Ceylon should be protected and patronised as he is, under circumstances which would lose any other Medical Sub-assistant in the colony his employment in the Government service, is not to be wondered at, seeing that the *legitimate* duties of the medical chief are almost entirely performed by this *First Clerk,* whose long experience is said to be the saving of each succeeding Principal Civil Medical Officer; who, for the most part, without any kind of local experience, and intent only on

* That the affection was limited to the lower portion of the œsophagus, is shown by the large quantity of fluid he swallowed ere it was returned; this fact I remarked particularly on the Sunday evening, the period of the attack.

his removal and promotion, can know little of his duties, and is not likely to care for aught else than his ease and self-aggrandisement; and hence, probably, it is, this officer has not unfrequently gathered about him various small persons, military and colonial, who, to advance their own interests, are ever ready both with their pen and tongue to do his bidding, whether it be in the shape of an anonymous attack on a brother practitioner in the columns of a hireling newspaper, or aught else thought conducive to the advancement of the FIRM.*

If the spirit of WAKLEY, that indefatigable man, were to reach this land of *cinnamon* and *pearls*, I take it he would be for making "*curry-stuff*" of some of

* It is much to be regretted that medical men, *generally*, are not more united. Unhappily in Ceylon, as elsewhere, each individual works for himself, "and revolves only, as it were, in his own orbit." This spirit of selfishness it is which gives encouragement and strength to the *despotism* so much complained of in the medical service of the colony, both that *military* and *civil*. The strength of Pizarro lay not so much in himself as in the mutual jealousies and mistrusts of Montezuma and his Mexican allies. Let my good friends, then, whom I leave in "*Lanka's perfumed isle*," profit by their history, if they would avoid an analogous fate. That the Principal Civil Medical Officer in Ceylon has few claims on *my* acknowledgments of his impartiality and desire to act justly, it is alone necessary for me to observe, that the preceding letter of mine, so completely exonerating myself, and inculpating the guilty and accusing party, was literally BURKED by him; for not only did he refuse to forward a copy of the correspondence to the Colonial Secretary for the information of his Excellency the Governor, although I wrote and requested as much, but what is more, he never even acknowledged its receipt.

his medical brethren. How would he start on being told, that, attached to one establishment containing something under 100 beds, and nine tenths of the patients *incurables,* there were so many as *four* graduated medical men, and one dispenser, viz. a consulting doctor, two visiting ditto (one bi-weekly, and the other daily), and one resident ditto; and upon which last gentleman all the work devolves, a *native of Ceylon,* but not one jot the less able as a practitioner,—a good exception to a bad rule.

To resume.—In all doubtful cases of *dysphagia* occurring suddenly among the insane, the use of the probang may be, rightly considered, necessary, even indispensable;* but having once satisfied ourselves that no foreign body is impacted in the gullet, no kind of circumstances can justify the

* I once met with the following case: a lunatic patient, an inmate of a public hospital, was thought to have got a bone, or other foreign body, in his œsophagus, because it was observed accidentally he could swallow only with difficulty. I asked for a probang, but as there was not such an instrument at the establishment, I desired that one might be directly obtained, and passed through the whole length of the gullet. On my next visit, I was told by the Resident Medical Officer that my directions had been followed, and that, although no apparent obstruction had been met with, yet was the patient so much benefited, that the *dysphagia* had entirely left him, and that moreover he ate and drank as usual. The patient died after some days, but inasmuch as he had been in a sickly and debilitated state for a long time previously, the circumstance created no particular attention or surprise; but on opening the œsophagus I found what I little expected, viz. a piece

introduction of the instrument, and to resort to force, *to bind the patient with cords,* &c., which Dr. Roe so much commends is, to say the least of such treatment, much to be censured. In all cases of this kind wherein the patient obstinately refuses to allow the probang to be employed, and the *respiration* is not at all affected, it is, I feel confident, infinitely better to wait for some little time in the hope of the patient relenting, as is done in the more common cases of "*refusal of food,*" than to proceed at once to extremities, and particularly to such as those approved of by the Medical Chief of Ceylon; but *he* and his party at Colombo are unable (in virtue of the unfavorable circumstances in which fortune has placed them, backed by an unhappy preponderance of the inferior and posterior parts of the cerebrum over the superior and anterior) to recognise, as others more happily organised can do, the advantages of the *morale* over the *physique.*

In conclusion.—After a colonial experience of nearly five years, it may not be considered presump-

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of bone attached by coagulable lymph to the side of the tube, where an irregular kind of pouch had been formed for its reception. A casualty occurring at this stage of the *autopsy,* I did not complete it, but it is on record that *the stomach contained food.* The thoracic contents were much diseased. The above is interesting if true, but I will *not* vouch for so much that is improbable.

tuous in me to suggest to the Secretary of State the total inexpediency of soliciting and accepting the services of a medical man holding a good and permanent public appointment at home, in order to send him to a British colony, to reform the abuses and remedy the defects existing in a peculiar department of the medical service—although a governor and his legislative council may advise and require so much—and at the same time place such a person in the position of a subordinate to the Senior Military Surgeon, under whom the said "*abuses*" and "*defects*" have been allowed to continue, and because, only, this officer is either ignorant of the ameliorations needed, or too apathetical to trouble himself about the matter. Moreover, I would ask those whom it most concerns, if it be compatible with such a relative position between these Government servants to accept, at any time, the recommendations of the same Senior Military Surgeon to discontinue the appointment of the other of them, although the *abuses* and *defects* may have been successfully remedied by the latter. I cannot doubt that, instead of making the poverty of the exchequer of the colony an excuse for the abolition of the office of "*Superintendent of the Insane,*"* it would have been

* The following is a verbatim copy of the letter sent to me, conveying the Governor's decision to dispense with my services :—

preferable at once to have confessed that, seeing the satisfactory arrangements brought into operation at the *new Lunatic Hospital,* and in acknowledging the successful issue of the means adopted for the amelioration of the insane, at Colombo, it had occurred to the local Government that my services were not likely to be any longer required, and that therefore Earl Grey would be recommended to allow the said office to be discontinued, and to decide upon the *compensation* to be given me for the loss of my situation. And particularly so, as the erection of any additional wards

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"Colonial Secretary's Office, Colombo;
14th June, 1848.

"Sir.—I am directed by the Governor to intimate to you, that with a view to the enforcement of that economy which the present state of the colony has rendered indispensable in every branch of expenditure, His Excellency has made arrangements for discharging the duties hitherto devolved upon you, and is now prepared to carry them into effect.

"But to prevent any inconvenience to you by the change, His Excellency will either defer it for 12 months, or should you prefer it, will direct 12 months' salary to be paid to you, together with a free passage for yourself to England, leaving you at liberty to proceed thither at once.

"I have the honour to be, Sir,
"Your most obedient servant,
"W. Morris."

"To Dr. J. G. Davey."

N.B. His Excellency the Governor afterwards revoked his decision, preferring to submit this proposal to abolish my office to the Right Honorable the Secretary of State, who, in accordance with Lord Torrington's advice, did so authorize him, but *not* without much delay.

to the establishment named for the accommodation of lunatics now in confinement at the various jails at out-stations; as *Kandy, Galle, Jaffna, Trincomalee,* &c. cannot for the present, and for a long time hence, be so much as contemplated by the local Government: however earnestly such may have been wished, and originally intended.

N.B.—I found the insane in Ceylon, in 1844, in neglect and wretchedness, the companions of debtors and criminals, and of the leprous, blind, and maimed.

I found them in a lazar-house, where filth and corruption, dilapidation and ruin were alone visible in some one or more of their protean shapes.

I found them, I may truly say, in chains and manacles, and made subject to a variety of personal restraints and to solitary confinement, almost perpetual seclusion.

I leave them (the insane), in 1849, the occupants of a well-built, airy, and commodious building, wherein every available care, attention, and forethought are employed for their relief and cure.

I leave them, in 1849, in an establishment set apart for their exclusive reception, where they are not

now, as formerly, subjeet to the presenee of the leprous, blind, and maimed.

I leave them, in 1849, in peace and in the enjoyment of the various bodily powers whieh belong to their nature, and free to move hither and thither at their pleasure; and herein rests my best eonsolation for whatever doubts and uneertainties the future might unfold to me. May after-years find the insane at Colombo equally well to do! but if the loeal government of Ceylon thinks that the improvements effeeted among the insane ean *now* be perpetuated and continued on with only a little attention and with very ordinary eare, I fear, it will one day find itself mistaken. I know that an uninterrupted and daily attention was required on my part to preserve the neeessary and healthful influenees in the establishment, and to prevent the reeognition of wrong principles of treatment; if they should once take root there, the strait-waisteoat will not long remain in disuse, and then to retrace the present vantage ground will be a work of little or no difficulty.

FINIS.

C. AND J. ADLARD, PRINTERS, BARTHOLOMEW CLOSE.